



An Australian Engineer Speaks Out - The Many Mysteries of Covid

The purpose of this message

I remember when one or two of my friends were telling me sometime in 2021 about the origins of the pandemic and the hidden dangers of the vaccines. I didn't take them too seriously, thinking that they had gone a tad too far down the conspiratorial road.

However, out of a mixture of curiosity and duty to myself, I decided to do some research – with the view that I'd be able to determine that they'd been victims of too much-sensationalised information.

Given that I used to head up the R&D division of a \$700-million organisation, and that I've managed a wide variety of literally hundreds of corporate projects, I figured that it was a challenge that I could take on. Also, given that I have an engineering PhD that has helped me

think critically, and that I'm very much a "show me the facts" type of guy, I figured that it wouldn't be difficult to put any and all crazy conspiracies to bed.

After all, the prevailing message was very clear and consistent from our politicians, health advisors, expert government bodies, the MSM (Mainstream Media) and other experts which was:

"Covid is a pandemic"

"The vaccine is safe, developed in record time"

"We need to be locked down and vaxxed for our safety."

It was a major, global event, but it all seemed pretty simple. Conspiracy – I don't think so!

What I hadn't realised back in August 2021 was that I had stumbled upon something that was so conspiratorial, widespread and ingenious in terms of its dark intents it subsequently left me day after day moving from a point of uneasiness to being increasingly disturbed as a result of what I was uncovering.

In the process of getting to the bottom of the whole Covid/Vax thing I waded through more than 700 papers, videos, opinion pieces and articles. I talked to numerous medical professionals like nurses, doctors and paramedics, and I waded through data, LOTS OF IT. Perhaps most crucially, I did deep dives at the data behind the data that was bombarding us daily as gospel – which took a lot of digging. In the process I realised that very little, in fact almost nothing of significance that we were officially being told by the government or the MSM was remotely true. And not everyone that I talked to had the same story, so that led to more digging to get to the truth.

Anyhow, as time progressed I came upon such voluminous amounts of information that I decided to take time off work (which stretched to a whole month) – right in the process of building a new business that I'd planned to launch ahead of my 50th birthday; instead, I found myself devoting 18-hour days almost non-stop to get to the bottom of what became increasingly like a disaster movie.

At this point, let me say that I am NOT offering any advice. I'm NOT saying that everything that I've read, referenced or quoted will have complete accuracy. It would take years to check the contents and the veracity of every single data and information source; that is the nature of science and discovery.

I've decided to lay out this paper in the form of a series of *Why?* questions – since there are A LOT of things that did not make sense for me if the aims of our government leaders were looking out for their people.

I expect that much of the content in this document will need updating within literally one week of reading it, since the latest data that is coming from literally dozens of sources, including frontline workers and whistle-blowers, many of whom have sprung up during the pandemic. Almost none of this information is available from the heavily censored Fact Checking Big Tech, MSM or Big Pharma funded medical journals.

It's worth stating that searches on Google – who has shares connected with Big Pharma, makes the task a little trickier since Google will 'fact check' things according to Google's truth; alternative browsers such as DuckDuckGo can assist with this issue.

I appreciate that much of this content will likely seem far-fetched, fictional even, with opposing perspectives to the MSM, the political and government's expert narrative that prevails – like it did to me when I first started off on the journey.

All that I would ask is that you keep an open mind and dig deeper into the facts behind the facts – without taking my word for anything that's written here. I'd prefer it if you did your own research from credible, independent experts.

I've had this document reviewed by several senior medical practitioners who were each extremely well read and exceptionally knowledgeable regarding all things Covid.

I would also attest to the fact that Big Pharma is a brilliantly organised, highly connected trillion-dollar industry connected to Big Tech and advisory institutions – making it more difficult to determine the facts. However, voluminous amounts of good, credible information can be found if you are just able to follow the breadcrumbs and good neutral sources.

The Why? Questions

1. The Mysterious Disappearing Flu

1. Why is it that the official government number of influenza deaths in Australia in 2021 is ZERO, and that there has not been a single flu death recorded since April 2020? **And that the number of previous flu deaths in Australia are coincidentally similar to the recorded Covid deaths?**
2. Why is it that the number of Flu Cases (interestingly, whose symptoms are similar to Covid) in the US declined by 99.5 % during 2020?

I've checked the figures from the official government web sites, since I at first thought that this was fake news.

2. Masks

1. Why is it that we must wear masks whenever mask manufacturers state that they provide no protection against Covid (and that they are Single use only)?

2. Why do governments insist on wearing masks, whenever the most comprehensive analysis of mask effectiveness from 65 publications and 44 experimental studies show that masks are actually HARMFUL to human health – with a range of negative aspects cited as being the following:

Increase in dead space volume

Increase in breathing resistance

Increase in blood carbon dioxide

Decrease in blood oxygen saturation

Increase in heart rate

Decrease in cardiopulmonary capacity

Feeling of exhaustion

Increase in respiratory rate

Difficulty breathing and shortness of breath

Headache

Dizziness

Feeling of dampness and heat

Drowsiness (qualitative neurological deficits)

Decrease in empathy perception

Impaired skin barrier function with acne, itching and skin lesions?

3. Why, when studies have been shown that wearing masks causes a range of harmful psychological and societal issues, does the government mandate the wearing of them?

3. PCR Test

1. Why are we using the PCR test to determine whether someone has Covid or not? The PCR test kits that are used in numerous countries have been found to be extremely unreliable from multiple studies and laboratory professionals; and also the PCR test kits used in many nations are purported to be unable to differentiate between Covid and influenza?
2. Why are we counting Covid cases at an amplification test cycle frequency in the testing kit that is very high, above levels recommended by Dr. Fauci, so that it produces significant numbers of false positives, leading to the assumption that Covid case numbers are significantly higher than they actually are? And why did the WHO sit on this information for months before going public?
3. Why are we using the PCR test to determine whether someone has Covid or not, when the inventor of the PCR test stated that the PCR test is not meant to be used as a diagnostic test and certainly not at the significantly elevated number of cycles that it is being used at – since it will produce erroneous results?

4. Vax Injuries and Deaths – what we're not being told re the numbers

1. Why, if the vaccines are safe, are Australian nurses so concerned about what they are seeing in relation to vaccine injuries and deaths that they have started a site on Telegram called

Frontline Workers Speak Out which in less than 2 weeks amassed over 38,000 subscribers and more than 80 whistle-blowers who have reported significant increases in both injuries post-jab, and deaths in both patients and staff?

2. Why are hundreds of Australian nurses and doctors from the above site coming forward? And why are thousands of frontline workers in many countries coming forward, at the risk of losing their careers in some cases, with claims that almost none of the injuries and deaths post-jab are being recorded as linked to the vaccine?
3. Why, if the vaccines are safe, was the Facebook page of America's ABC inundated with over 250,000 stories of vaccine related tragic injuries and deaths within the space of just 5 days -- when it asked for tragic unvaccinated Covid stories (before they removed the page)?
4. Why is it that we have not been told that from the US Medicare database (not available to the public) that 48,000 people died within 14-days of receiving their jab (which is multiple times the number shown in the VAERS (voluntary adverse events reporting system data)?

(Of particular note is the fact that the Medicare database represents only 18.1 % of the US population, meaning that the real death numbers from the vax **in this period only** are more likely to conservatively be at least 200,000).

5. Why did Mr. John O’Looney, the owner of a family funeral business in Milton Keynes, UK, claim that whenever the vaccinations started to happen in bulk he saw a very significant rise in the number of deaths in the population, claiming that he was burying the dead at a rate he had never experienced previously and, after talking to many medical professionals and frontline workers, concluded that he was “*dealing with murder victims*”?
6. Why did the 45 undertakers in Mr. O’Looney’s regional area also say that they could scarcely keep up with the rate of burials, and why would Mr. O’Looney say those things believing that it would probably cost him his membership of the association – which it did soon after he went public?
7. Why, if the vax is safe have US Army doctors filed affidavits in a lawsuit for a preliminary injunction in Federal District Court of Colorado, under the Military Whistleblower Protection Act, calling for an immediate halt to further COVID-19 “vaccinations” for all military personnel and the grounding of all personnel as a result of three pulmonary embolism events within 48 hours of their vaccination, one fatal?
8. Why is it that the governments of the UK, Europe, and the USA maintain that “the vaccines are safe” yet 5-million adverse events (where approximately 50% will result in life-time disablement) have been recorded in the voluntary reporting systems – which have been acknowledged in numerous studies to under-report adverse events by a factor of between 10 to 100? And why was the vaccination program not stopped in Australia given that the number of adverse events recorded in 2020 were 2 x number of adverse events recorded for the previous 20-years combined?

5. What are the Real Experts Saying?

1. Why did **Dr. Sucharit Bhakdi** who is a leading virus expert in microbiology in Germany, one of the most cited research scientists in German history, former professor at the Johannes Gutenberg University in Mainz and head of the Institute for Medical Microbiology and Hygiene, say:

“Gene-based vaccines are an absolute danger to mankind and their use at present violates the Nuremberg codex, such that everyone who is propagating their use should be put before tribunal.”

“Especially the vaccination of children is something that is so criminal that I have no words to express my horror ... We are horribly worried that there’s going to be an impact on fertility. And this will be seen in years or decades from now. And this is potentially one of the greatest crimes, simply one of the greatest crimes imaginable.”?

2. Why does **Dr. Peter McCullough**, MD, MPH, FACC, FACP, FAHA, FASN, FNKF, FNLA, FCSRA, Prof. of Medicine with more than 1000 publications with more than 600 citations in the National Library of medicine, a world-renowned expert and leader in cardio and renal medicine, who has cured many hundreds of Covid patients with more than a 99 % success rate state:

“The current code vaccines; AstraZeneca, J&J, Pfizer & Moderna right now are obsolete. They do not cover the new variance. Patients are failing on these vaccines, they’re being hospitalised and getting sick despite having the vaccines. The vaccines at this point in time have amounted to record mortality and percent injury, and should be considered unsafe and unfit for human use.”

“The failed mass Covid-19 vaccination programme will go down as one of the most deadly in history.”?

3. Why does Nobel Laureate **Dr. Luc Montagnier**, expert virologist, awarded the Nobel Prize in Physiology or Medicine in 2008 with a colleague for his discovery of the Human Immunodeficiency Virus (HIV) say:

“We’re in unknown territory and proclaim mandatory vaccines for everyone. It’s insanity. It’s vaccination insanity that I absolutely condemn.”?

And why is Dr. Montagnier claiming that widespread vaccination of children could have horrific generational consequences. And that the “Messenger RNA” may result in disastrous consequences without proper study; and why does he warn of the possibility of side effects of vaccines that could be seen in five to ten years related to neurodegenerative illness?

4. Why does **Dr. Zev Zelenko**, a Nobel prize nominee and Presidential medal of freedom nominee who has successfully treated hundreds of Covid patients with a 100% survival rate,

where his patients rarely require hospitalisation say:

“Covid War Criminals Should Face Nuremberg-Style Trials For Crimes Against Humanity.”?

5. Why does **Dr. Geert Vanden Bossche**, virologist and vaccine expert, who sits at the top of his field in what are probably the deepest and most insightful (non-Big Pharma funded) scientific articles that you will ever read on Covid make the following claims:

“The mass vaccination hype will undoubtedly enter history as the most reckless experiment in the history of medicine.”

“Major outbreaks in countries with full vaccination rates ... show that Herd Immunity is not improbable but impossible.”

“Mass vaccination campaigns may have a beneficial short-time effect in that they reduce viral spread and protect vulnerable people from disease (e.g., elderly people and those with underlying disease), but will eventually drive the propagation of more infectious variants.”?

6. Why is the MSM not telling us that **Dr. Reiner Fuellmich** (who was a lead lawyer in suing Volkswagen over Diesel-gate for \$ 4.3 billion – the largest automotive fine in history) has assembled an associated team of more than 10,000 doctors and more than 100 lawyers to bring a Nuremberg 2.0 type trial in relation to the vaccine-pushers; he states:

“The frauds committed by Volkswagen and Deutsche Bank pale in comparison to the damage wrought by those who sold the Covid-19 crisis as the worst viral outbreak to hit the world in more than a century and used it to cause media-driven panic, government overreach and human suffering on a scale still not fully quantified.”?

6. Vaxxed versus Unvaxxed

1. Why is it that, in the latest data from the UK, US and Australia, we are frequently seeing daily death rates for vaxxed people which are SIMILAR TO OR GREATER THAN that for unvaxxed people (whereas in the early days of vaccination it was the other way round), as has been predicted by several top non-government virologists and immunologists?
2. Why is the case that the latest data that has been exposed from the DOD-stamped document in the US, that would have been presented to the CDC and other agencies, shows that 71% of all new Covid infections are breakthrough infections, i.e. from people who have been vaxxed – meaning that **it is a crisis of the vaxxed not the unvaxxed**; and these numbers are **rising**?
3. Why is it that NO government sources are telling us what a growing number of experts have been saying all along – which is that vaxxed people can pass illness from the spike protein onto the unvaxxed, according to PFIZER’S OWN DOCUMENTS?

4. Why is it that we have heard nothing in the MSM or from our politicians that an exceptionally extensive study involving both 2,947 US counties and 68 countries show that there is not only no difference in the Covid infection rates between the vaccinated and the unvaccinated, but that the rate of Covid amongst the vaccinated INCREASES with the percentage of the population who are vaccinated?
5. Why, if the vaccinations are effective against Covid, are the percentages of people in ICU in hospitals such as Adelaide predominantly comprised of vaxxed people?

7. Children

1. Why are countries rolling out the vaccine to children aged 12 – 16, when the reported deaths of children from the flu in the US is greater than that of Covid?

(As of now, there are 332 deaths of children with COVID in the U.S. This compares to about 450/year in a normal flu season—and remember, these 332 deaths occurred during TWO COVID seasons. Beyond this, the CDC has noted that 35% of these deaths could not possibly have had anything to do with COVID [e.g., they were car accidents, suicides, etc.]. Thus, the actual number is not possibly above 219).

2. Why are we rolling out the vax to those under 18 years of age when up until 5th Sept 2021 there has been only one (1) death in the 10-19 age group in Australia (and the one Covid positive death was someone who had passed away from viral meningitis)?
3. Why are doctors not informing children and parents that **the risk of children dying from the vaccine is 4 x that compared to Covid**, according to a consortium of Irish doctors appearing in a video by the *Irish Council of Human Rights*?
4. Why are doctors not informing parents and children that the risk of vaccination in 12 – 15 year-old males increases their odds of developing a serious myocarditis condition post-jab (which is frequently permanent) by a factor of up to 19?
5. Why are governments constantly pressuring children and institutions, even when official advisory bodies to the government are recommending against it, to take the vaccine when there are numerous studies (almost all suppressed) showing that there is a NEGATIVE BENEFIT for children to take the vaccine, noting especially an exponential rise in debilitating myocarditis events experienced by young males in particular?
6. Why, if vaccines are safe for children, did Project Veritas recently release a bombshell undercover video where Brandon Schadt, Johnson & Johnson's Regional Business Lead was caught admitting the following re giving the vax to children:

“It's a kid, you just don't do that, you know? Not something that's so unknown in terms of repercussions down the road, you know?”

“Kids shouldn’t get a f*cking [COVID] vaccine.”

“It’s a kid, it’s a f*cking kid, you know? They shouldn’t have to get a f*cking [COVID] vaccine”

7. Why are NZDSOS (New Zealand Doctors Speaking Out with Science) being ignored by the NZ government, when they have reported 5 deaths in vaxxed teenagers, and why are the NZ authorities not reporting these deaths? And why have gag orders been placed on people associated with all of these deaths, and why are the NZ government effectively covering up these facts?

8. Conflicts of interest?

To better understand how the MSM and special interest groups manipulate medical narratives I would highly recommend having a listen to the very insightful TEDx talk video by Sharyl Attkisson called, “*Astroturf and manipulation of media messages.*”

1. Why might there be some concern regarding Prof. Peter Doherty (notwithstanding his positive contributions to the industry) and the Peter Doherty Institute due to the fact that he is in collaboration with Vaccine and Immunisation Research Group/Murdoch Children's Research Institute which has received very significant amounts of funding from vaccine manufacturers GSK, Janssen, Merck, Novavax, Sanofi and Sequiris?
2. Why would we trust Bill Gates, who is renowned for his absolutely appalling safety record regarding vaccine rollout – particularly in India – where the Indian government is suing him for the paralysis of 496,000 children as a result of Gates’s vaccines?
3. Why would we trust Bill Gates and his ties with the pharmaceutical industry when for Gates it has been, and always will be, about making unfathomable amounts of money, like the way in which he stated on air that he would make \$ 200-billion from his \$ 10-billion investment in vaccines?
4. Why would we place such emphasis on the advice from Bill Gates – who continues to fund billions into vaccine research, development and promotion – directly or indirectly funding the many institutions that make the policy decisions regarding vaccine rollouts?
5. Why might we believe that any research papers by ‘respected’ medical institutions or publishers that are partly or entirely funded by the Bill & Melinda Gates’ foundation, GAVI and so on would be likely to give positive reviews for products such as Hydroxychloroquine and the like, that compete with vaccines that Gates’ is developing?
6. Why do we permit such blatant and widespread conflicts of interest between the vaccine manufacturers, Bill Gates’s foundations, research institutions and many of our UK, Australian

and US government leaders, which in a traditional corporate setting would be unthinkable, and which would lead to significant fines and prosecutions?

7. Why is it that Professor Neil Ferguson, epidemiologist with the Imperial College London, who collaborates with WHO and receives funding from the Gates Foundation, has such an influential position in advising the UK government on the effects of national or global disease outbreaks – when almost every single one of his predictions from Swine Flu to Ebola have been over-exaggerated by multiple orders of magnitude?

8. Why is it that many of the technocrats in many countries who are advising the governments and policy makers have direct or indirect financial interests in Big Pharma – where in the US for instance there is an interconnected web between Big Pharma funding, Bill Gates, the NIH, CDC, FDA etc?

9. And why do the authorities not seem to have an issue with the fact that Bill Gates – who is inextricably linked with Big Pharma, is THE BIGGEST donor to the WHO after the US government?

9. Big Pharma – Data, Testing and Trust

1. Why should we trust vaccine manufacturers, who have one goal which is to make money (\$ tens of billions every year from the booster shots alone) and who have for the past several decades had complete and absolute prosecutorial immunity against being sued?

2. Why would we trust Big Pharma, given the plethora of past and current lawsuits against them – including a record-breaking \$ 2.3-billion fine for fraud against Pfizer in 2009 – the largest in Pharma history? ... only to be outdone by GlaxoSmithKline three years later with a \$ 3-billion fine for fraud allegations and failure to report safety data?

3. Why are vaccinated people not told that vaccine trials indicate that there is a chance that the vaccine can penetrate the endothelial layer and the blood brain barrier causing neurological damage, and why is there A LACK OF INFORMED CONSENT provided before being vaxxed?

4. Why is it that the four major vaccine companies have denied that graphene oxide is used in their vaccines, yet a very comprehensive study conducted in Sept 2021 unambiguously and categorically showed that the major vaccines DO contain graphene oxide?

5. Why is it that there is no MSM publicity surrounding the findings from the mid-Sept 2021 Corona Committee Conference from 35 groups from across the US, the UK, Austria and Japan that looked at hundreds of samples from three of the vaccine manufacturers, finding sharp metal objects, graphene fragments, and non-biological (inorganic) material - that “*have no business being in a vaccine*” according to the researchers?

6. Why does there seem to be a media blackout on the fact that a group of lawyers, medical professionals and activists have asked members of the Polish parliament and Senate to organise an urgent investigation into the allegations of numerous whistle-blowers who have claimed that Pfizer was performing testing on 6-month-old orphan babies as part of their experiments?

7. Why is there not an outcry over the fact that 2,300 private emails from Dr. Anthony Fauci and various agencies and Big Tech reps (including Mark Zuckerberg) are alleged to reveal that:

Hydroxychloroquine is effective against Covid

Masks are useless against Covid

Fauci was talking to Big Tech about censorship of cures for Covid

Fauci makes a small fortune from the funding, vaccine research and patent ownership from the vaccines.

Covid was man-made in a lab

Fauci's 'gain of function' research funded it, a practice that is illegal in the US because of the significant risks that it poses.

Why are we not being told that taking Covid mRNA vaccines, according to an increasing number of studies (despite the wave of denial to the contrary by Big Pharma) is resulting in an accelerated rate of Antibody Dependent Enhancement (ADE), INCREASING the likelihood of developing illness from new Covid strains where those vaxxed are showing an increased risk of vaccine failure / covid infections requiring hospitalization?

8. Why were there ZERO studies conducted on the vaccines to show the effect that they would have regarding:-

- Toxicity
- Genotoxicity
- Carcinogenicity
- Auto immune diseases
- Other drugs being taken?

9. Why do documents from Moderna show that in just three months after roll-out, their internal reporting systems part way through the pandemic had recorded a staggering 300,000 adverse reactions to the jab, multiple times the figures contained within the VAERS database?

10. Why did the FDA not address the manipulations and violations from Pfizer regarding the protocol surrounding the testing of children after it submitted its review prior to approval, according to Dr. Yaffa Shir-Raz, a risk-communication researcher and a teaching fellow in the University of Haifa, Israel?

(She reported that the conventional Phase 3 part of the trial that normally lasts between 1 to 4-years was completed in only 30-days; and at least four of the children in the study [a

significantly high number at 0.4%] suffered from serious adverse events – that is, events in which at least one criterion was met: caused death, is life-threatening, requires hospitalization or prolongation of existing hospitalization, results in persistent disability/incapacity, a congenital anomaly/birth defect?)

10. Ivermectin - the herd of elephants in the room

1. Why is there widespread negative publicity by the authorities stating that Ivermectin is ineffective, unsafe, unproven, without peer reviewed studies in the fight against Covid, when in fact:
 - There have been at least 42 peer reviewed studies on Ivermectin
 - It is as safe or safer than paracetamol
 - It has won a Nobel Prize
 - It has seen 3.7-billion doses administered worldwide
 - It has been used very extensively and successfully in the fight against Covid - in India, El Salvador, and around 30 other countries?
 - It has been shown to reduce mortality anywhere between 65 % to 85% in the majority of studies, depending principally on how soon it is administered to Covid patients?
2. Why have we not been told that the countries in Africa that have been using Ivermectin have 7 x less morbidity and 8 x less mortality from Covid compared to nations that do not?
3. Why, if vaccines are effective, is it the case that the countries that are highly vaccinated like Israel (who experienced a surge in cases upon the rollout of the third [booster] shot) have multiple times the cases of Covid compared to Uttar Pradesh's province of 241-million inhabitants that used Ivermectin along with some other inexpensive drugs in a widespread program that resulted in complete eradication of Covid in most of its regions?
4. Why have we constantly been told that Ivermectin is ineffective against Covid (where 'evidence' that cites poorly conducted, non-peer reviewed studies is used) when the amount of evidence – peer reviewed and otherwise to the contrary is simply overwhelmingly without equal?

(For evidence regarding why Ivermectin works there is a paper by a retired Australian doctor called Dr. Robyn Stephenson called "*It is Dangerous to Suggest that Early Treatment for Covid-19 is Unsafe*" published by The Canberra Declaration who spent 6-months performing research into Covid, citing 119 sources, on all things Covid. In my opinion this is literally in the top 0.1% of best research papers that I have come across on any topic).

5. Why, if Ivermectin is as effective in the fight against Covid as the abundant amount of (non-Big-Pharma linked) research suggests, have the TGA banned it? And why does the TGA both

investigate, deregister and fine doctors with a risk of imprisonment if they prescribe Ivermectin to patients within Australia?

6. Why did the head of Merck, Sharpe & Dorne – the inventor of Ivermectin, advise against Ivermectin's use in the treatment of Covid via this very inexpensive off-patent drug, (just before landing a \$ 1.2-billion government contract for the supply of an expensive drug used to fight Covid)?

7. Why was it that as soon as Ivermectin was being touted as a cure for Covid, more than 200 scientific studies appeared [many with Big Pharma linked funding] warning us of its dangers and lambasting those who were being hospitalised for taking the horse-worming versions [despite having no evidence from either hospitals or people that this was happening]]?

8. Why was it not publicised by the MSM that the Indian Bar Association is suing Dr. Soumya Swaminathan, chief scientist of the WHO, for supposedly deliberately ignoring and suppressing the FLCCC and the BIRD Panel's data regarding the effectiveness of the drug Ivermectin, with an intent to dissuade the people of India from using Ivermectin?

9. Why is it, if Ivermectin is unsafe and ineffective against Covid, is it being given to select (vaxxed) Covid patients in some Australian hospitals?

10. Why is it that the Australian government has banned Ivermectin when the evidence relating to its safe and effective use against Covid is breathtaking, covering the following types of studies and trials – which almost all show moderate to significant efficacy in the fight against Covid

- a. Randomized Clinical Studies
- b. Observational Clinical Studies
- c. Epidemiologic Studies
- d. In-vitro studies
- e. In vivo studies
- f. In-silico studies
- g. Clinical, Pharmacologic observations / experience
- h. Observational control trials
- i. Meta analysis of randomised control trials
- j. Observational and randomised trials?

11. Why do the Western nations of the world in particular take no notice of the fact that Uttar Pradesh in India has practically eradicated Covid whilst by comparison the Indian state of Kadesh who are not using Ivermectin has a Covid case rate of more than 1000 x that of Uttar Pradesh?

11. Government Policy and politics

1. Why is it that members of a growing number of countries, including Poland (a previously Communist country) are protesting against the claimed overreaches of the Police in Victoria against protestors (notwithstanding the fact that some protesters were doing the wrong thing), outside the Australian Embassy in Warsaw, Poland, prompting the following statements:

“The whole world sees what is happening in Australia. Australia has contracted Covid madness. This is how totalitarianism is born, these are not conspiracy theories.”?

2. Why does there seem to be almost no concern nor criticism by the MSM and politicians in Australia regarding the draconian treatment of protestors in Victoria in particular who were shot in the back with rubber bullets while running away from Police, whilst others have been slammed head-first into the ground, encouraged by commanders who look forward to “*cracking some skulls?*”

3. Why is it that the governments of many countries, Australia in particular, are mandating severe, draconian lockdowns – that have been condemned for quite some time now by the WHO for leading to significant deprivations to both people’s and nation’s health and wellbeing?

4. Why is Australia focused on going down the lockdown route whenever there are numerous studies showing that lockdowns don’t work, including significant examples like Sweden which was infamous within Europe for having almost no lockdown, instead keeping schools, businesses and their economy open?

5. Why do the politicians in Australia and in NZ (**who locked down the whole of the South Island despite having ZERO Covid cases**, decimating the tourism industry in the process) choose to lock down their regions, despite the evidence from states like North Dakota and South Dakota that experienced near identical Covid statistics despite one state opening up and one state remaining locked down?

6. Why is it that governments mandate lockdowns to specific employment sectors (forcing many vaccine-hesitant people to lose their jobs and livelihoods in the process) whilst refusing to mandate vaccinations for themselves at both state and federal levels?

7. Why is it that many hundreds of thousands of frontline nurses and doctors around the world who worked extra shifts, around the clock with claustrophobic, ill-fitting, physically bruising PPE during the worst of the pandemic are being rewarded by their governments with the loss of their job for not taking the job, in turn straining health systems?

8. Why are governments mandating vaccines for those who have recovered from Covid when the real-life data is increasingly showing us that taking the vaccine for this naturally immune group of people actually INCREASES the chance of catching Covid?

9. Why are we quarantining the healthy in the midst of this 'pandemic', causing immunological experts to be horrified, when this has NEVER been done during viral outbreaks or pandemics where historically only the sick have ever been quarantined?

10. Why are many states and countries mandating jabs for people who have already recovered from Covid, when the data shows us that covid-recovered persons are 13 x less likely than vaxxed persons to develop Covid, and are at almost zero risk of serious injury or death post-Covid recovery?

And why are we mandating the vaccination of Covid-recovered persons when Pfizer scientists were filmed undercover admitting that natural antibodies are better than the vaccinations in the protection against Covid?

11. Why has the government of Australia continued with their current severe lockdown policies, at a cost of approximately \$200-million for each death to date, plus immeasurable additional costs regarding social, mental, physical, community and economic aspects that will be experienced for many years to come?

12. Why does the Australian government seem to be indifferent to the fact that an increasing number of US politicians are calling out Australia on its blatant human rights violations, in Victoria at least - being administered under the guide of paradoxically 'keeping people safe' during the longest locked down city in the world?

And why are some US representatives almost unthinkably calling for Australian boycotts as a result of the human rights violations experienced within Australia which have ignominiously resulted in them labelling Australia "*Apartheid Australia: Hell on earth.*"?

13. Why has AHPRA silenced health practitioners from raising concerns about what they call the experimental gene therapy (called Covid-19 vaccine); and why has AHPRA dismissed some seasoned health practitioners and threatened others with fines for raising genuine concerns that have been counter to AHPRA's prescribed narrative?

14. Why is it, given that Covid ranks well outside the top-20 causes of death and that the \$ 300-billion (and growing) cost, merits state governments implementing the harshest lockdowns in the world and shutting down significant aspects of the economy?

15. Why is it that Australians who have emigrated from Communist / Marxist countries seem to be the first to claim that Australia has become fascist in our governmental approach, making many comparisons to Germany in 1937?

16. Why would we trust Dr. Fauci with one of the most influential positions within America at this time, as he assists in formulating pandemic response policy, given that he is infamously on

the record for constantly contradicting his own advice on numerous occasions?

17. Why has there not been calls for a major investigation into the claim by the SALK Institute in San Diego – the premier global research institute on vaccines, that the spike proteins in the mRNA vaccines were found to be pathogenic during testing? The institute claimed that **THE VACCINES ARE CAUSING THE DISEASE**, and that they damage cells and cause vascular disease even without a virus, a claim that is being espoused by a growing number of immunologists and epidemiologists?

18. Why is it that there has been an almost complete media blackout regarding multiple, recent courts cases against the government-mandated lockdowns, unfair dismissals regarding the job, and alleged multiple breaches of human rights abuses – such as the claim by G&B Lawyers that a total of 13 individual rights and freedoms are being infringed by NSW public health orders?

19. Why are few people aware that Jack Ma (China's richest man) and TikTok (the Beijing-owned social media site) were each reported to having donated over \$ 3 million AUD to Melbourne's Doherty Institute vaccine research – the body that the government relies upon for clinical, research and public health advice within Australia regarding the COVID-19 response?

20. Why does the government data relating to the number of injuries and deaths keep moving up and down on the Australian TGA website, along with categories being changed; and why on the US VAERS website did independent analysts report the deletion of some 150,000 adverse reaction records thereby reducing the number of vaxxed injuries along with countless other examples of specific VAERS case numbers being altered?

21. Why is it the case that in the recent 8-hour review panel before the FDA a group of scientific researchers claimed that, based upon the VAERS data, for every life that the vaccine saved from Covid it killed two people, or up to five people killed for every life saved based upon other data; and why did the CDC go ahead and approve the vaccine after this anyway?

22. Why is it not well known that in cities such as Melbourne The Rockefeller Foundation (linked directly to Big Pharma) and the United Nations have multiple networks in place that deal directly with city Mayors and leaders of LG municipalities, that bypass red tape and constitutional governance at state or national levels, enabling the deployment of overseas troops in emergency situations – as is allegedly the case in Australia during the Covid crisis?

12. Other

1. Why did the CDC change its definition of Covid reporting guidelines just prior to the pandemic, resulting in 16.7 x higher number of deaths than there would have been under the previous reporting guidelines?

2. Why is Remdesivir being prescribed by AHPRA in Australia and by the FDA in the US as part of the recommended treatment protocol whenever a previous trial with Remdesivir saw it kill so many people that it was withdrawn from the trial?
3. And again, why is it being prescribed when in June 2020 a trial was published involving 61 patients with Covid-19 who were given a 10-day course of Remdesivir that ultimately resulted in 23% of them suffering serious adverse events - most commonly serious multiple-organ-dysfunction syndrome, septic shock, acute kidney injury, and hypotension?
4. Why, if the vax is so safe, are a significant number of people, most of whom are well informed from a wide variety of sources, not taking it (including the largest group of vaccine-informed groups being those with PhDs), instead choosing to imperil their livelihood, careers, and even reputations?
5. Why are we not informed that there is a reduction in the capability of the immune system against other types of diseases with each successive jab that is taken, making the body more susceptible to picking up other infections?
6. Why has virtually no mention been made of the fact that within the European database of 420-million people there is an unparalleled level of detail showing that the total deaths during the Covid wave in 2020 coincided almost identically with the flu season of 2017/2018 and that the total deaths during the Covid 2020 wave were practically identical to long term total deaths trendlines in Europe for prior years?
7. Why, if vaccines are safe, did Project Veritas release in their undercover expose of a Johnson & Johnson scientist called Justin Durrant who said, *“Don’t get the Johnson & Johnson [COVID vaccine], I didn’t tell you though.”*
8. Why do we not believe that there could be a possibility that the \$36,000 offered to US hospitals for Covid deaths could be an incentive for them to record deaths as Covid when they might not be, resulting in an inflation of the actual numbers?
9. Why is it that if the vaccines are safe, that in just my personal orbit of acquaintances and their acquaintances in Australia we can together list **10-people who we know personally between us who have died** within a month, most within days, of taking either the first or second vax – as follows:
 - A good friend of mine and her friend know of **three deaths** – all dead within several days of taking the vax, no co-morbidities: i) A healthy mother in her 50’s, ii) a 51 year-old mother, healthy – literally dropped dead in a work meeting in front of her distressed colleagues, iii) a fit 71 year old man who started bleeding from multiple places over his body. Dead several days later.
 - Another close friend of mine was furnished with information regarding **four deaths** from a close friend and trusted source in a NSW country town, all within days of taking the vax.

- An ambulance officer on the front line (now out of work for not taking the vax) knows of **three deaths** - one of whom was a very fit 44 year-old medical professional (whose name I know but will not disclose for purposes of anonymity), dead within days of taking the jab?

(Based upon my discussions with these sources it is most unlikely that most, if any, of these deaths will be recorded on the official TGA website as vaccine related deaths? We suspect this since this is what many dozens of whistle-blowers in the US and Australia are telling us).

10. Why is it that if the vaccines are safe that a study claims that 12% of people in the US know of someone who has died after taking the vaccine?
11. Why are there countless deaths recorded as Covid deaths whenever they have nothing at all to do with Covid, aside from the fact that they died WITH Covid; for example, media headlines such as these have been reported "*Man who died after falling from a 10-foot ladder was actually killed by Covid:doctors*", or "*Man dies from Covid after being shot dead.*"?
12. Why is there not greater consideration being given to the wellbeing of teenagers who are self-harming at record rates, with at least 40 teenagers rushed to hospital in New South Wales for self-harm every day, exacerbated by the lockdown restrictions, with various states in Australia beating previous helpline call records?
13. Why does the ex-Premier of NSW, Gladys Berejiklian, and other politicians consistently mention phrases like "*I certainly wouldn't want to be in the same room as an unvaccinated person,*" if the vaccines are meant to provide protection against Covid?
14. Why is it that the Red Cross in the US has recently announced that it is not accepting plasma donated from vaccinated people (although it is still accepting blood)?
15. Why is it that, according to PANDA (Pandemic Data and Analytics) when we stop to reflect on things at this point in time regarding all things Covid that it would appear that ALMOST ALL of the policies in many countries regarding their pandemic response are the exact OPPOSITE of what might be considered rational in the bid to save lives?

13. Wrap up

I fully appreciate that much of the information in this document will probably be new, given that it will COMPLETELY CONTRADICT the mainstream media, government policies and so-called expert advisory bodies.

All that I would ask you to do is to perhaps stand back and do your best to look at the data/evidence by somehow finding independent sources and make your mind up from there. I will end by asking three questions:

1. Should we trust governments to 'just do their job' in terms of making and enforcing their Covid-related orders without question because they know best?
2. Or is there something more that we should be doing to shout this message from the rooftops, if indeed we believe that we have a crisis on our hands?
3. And if so, what might each of us personally do?

I'd like to give the penultimate opportunity to 'speak' to Prof. Vernon Coleman, an international bestselling author and retired medical doctor. He is an acknowledged expert on drug and vaccine adverse events. He is not one to exaggerate; his predictions regarding the evolution of the Covid crisis have so far come to pass with chilling accuracy. In a prior video he literally broke down in uncontrollable sobs at one point when he reflected upon the path that humanity was embarking on in terms of the global vaccine rollout at a breakneck pace:

Given that today is a significant milestone birthday for me (the Big ½-Century) I'd like to perhaps indulge in a little humour given the darkness of this topic by giving the last word to Little Suzie, a made-up character of sorts, who with a broad smile on her face holds a TV screen in one hand that she has smashed with a hammer in her other hand, with the following caption: *"And just like that ... little Suzie cured the worst virus of all."*

14. Critical Information Sources – please watch if you can

There are many hundreds of high-quality information pieces that I could list here – none of which you will find in the MSM or amongst government sources.

But if you've managed to make it this far – well done and thank you. I appreciate that this will not have been a light and easy read.

However, if you could spare the time I would **very highly recommend** listening to these videos or transcripts – perhaps even just the shorter ones, which will help to fill in many of the gaps that I have not been able to complete in the space available here.

Note that search engines like Google will typically censor anything that questions the use of vaccines and YouTube have publicly admitted that they will remove any content that speaks out against vaccination, so you might for example have to do some digging in the ether for the required information by using a web browser such as DuckDuckGo. And of course if you search for these articles, below, you will quite likely be met with the all-knowing Fact-checkers (many of which have direct or indirect ties into Big-Pharma) that will claim to debunk some of these videos).

1. Project Veritas Undercover cameras with Pfizer corporation. 10-minute YouTube video plus various alternative news articles where Pfizer Scientists claim that natural [COVID] Antibodies Are Better Than The [Pfizer] Vaccination.

2. How Rockefeller Founded Big Pharma And Waged War On Natural Cures. 3-minutes, very insightful

3. Microscopic examination of vaccines by Dr. Carrie Madej on Stew Peters show on Rumble. 16-minutes; both surreal and disturbing.

(I will admit that I have not had an opportunity to examine this in detail; however, others have seen similar things under the microscope, so I think this is probably genuine, although I hope that it is not).

4. 2030 unmasked documentary: 2-hours long, EXCEPTIONALLY INSIGHTFUL, pulling back the curtains into the worlds that are purposely kept from us.

To save a little time you could perhaps skip the first 20-minutes and the last 5-minutes. Can be played at double speed.

5. Revealing Covid. 1-hour presentation by a retired doctor. Exceptionally insightful, useful and informative. Link: [Revealing Covid - Condensed Edition \(rumble.com\)](https://rumble.com/v2z3u3)

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