



REPLY TO
COMMENTARY

Some Reflections on Bobrow's Counterpoint to Walach's Review

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I am grateful for Robert S. Bobrow's "Counterpoint." Discourse and controversy are essential elements both of science and of finding political consensus. Both have suffered immensely over the last two years. And in my view, this has to do with the subtle mechanisms of installed censorship. Dissenting voices are silenced in the media and in academia. Political opinion is no longer a free, consensus-seeking debate. All is put under the umbrella of "unity for fighting the pandemic."

I think the way one can read Kennedy's book, my review of it, and Bobrow's comments hinges on two central questions. I am not going to answer them, but I wish to raise them for discussion. I will give a few bits of my opinion and my reasons for it.

The first question is: Is it true that we were faced with a "pandemic," i.e., a worldwide, devastating infectious disease problem? The second question is: Can we really trust our institutions, i.e., the political executive (in the United States the president and his administration, in Germany our chancellor and the executive ministry), our media, our parliamentary democracy?

Depending on your own answer to these questions, you will find both my review and Kennedy's book annoying or helpful. Bobrow obviously answers both questions in the positive.

I would agree with him: Vaccinations have done a lot of good, especially in the case of polio. But, following some studies and reports relayed by Kennedy, the recent polio vaccination campaigns in India and Africa have led to more unwanted effects than benefits and were stopped by the governments for that reason. That might have been completely different in the 1960s, when polio was a real threat. But one fact, easily overlooked, likely not so relevant for polio, but for other diseases is: All infectious diseases were on a steep decline many years before vaccines became available. That vaccines might have accelerated the decline is likely. Had we not found any vaccines, we might have seen the same decline, only a bit slower. This argument is old and was made, to my knowledge, first by McKeown (1976). But the point is, Covid-19 vaccines are not vaccines. But let me get back to that argument later.

Back to our central questions: I was, by and large, of the opinion that our institutions function well. Until I started to read a bit more widely in political texts, media literature, and critical social analysis. For instance, reading well-researched books such as those by Sands (2020), Sutton (1976), and Talbot (2015) gives you some taste of underground politics where background forces are at work that steer the seemingly benevolent forces of visible political actors toward the agenda of powerful elites and their benefit. It is a bit like losing your virginity: You are different, once you realize this. And with that kind of knowledge, you are more willing to be critical regarding publicly presented narratives. Therefore, I am at least willing to entertain the proposition that our political leadership is not necessarily benevolent and that powerful forces backstage try to get their will.

Now, if you look at the pandemic and its history, well-documented by Kennedy, you



see how a couple of mechanisms jump into place. My stance, initially, was open and curious. It was when I saw the divergence between publicly communicated figures and the facts that I saw in the scientific literature that I became first critical, then skeptical, and then outright convinced that something was utterly wrong. This started me on a journey of my own, an interview study, which I am since conducting. And the more I talk to experts of various kinds, the more my skeptical stance grows.

For instance, once you realize that the COVID-19 Infection Fatality Rates (IFR) are comparable to, in some countries lower than, influenza (Ioannidis, 2021), would you then still call the whole thing a pandemic? Once you realize that the pandemic definition was changed by the WHO in 2018, I believe, to get rid of the hitherto essential criterion that a pandemic had to have a high IFR, would you still think it is pandemic? Had we not had the various dashboards counting cases and fatalities, would we still have seen an emergency (Everts, 2020)? Had we not made a test that was never developed for overall screening and which is moreover quite non-specific—the CDC admitted on its website mid-2021 that it could not distinguish between flu and SARS-CoV2—the arbiter of diagnosis, would we have seen the same pandemic? For instance, only below roughly 22 cycles of amplification does the PCR test find viral material that might be indicative of infectivity (Jefferson et al., 2020). In Germany and probably elsewhere the standard cycle thresholds are about 37 to 45. Is this a solid diagnostic? I submit: We are dealing with a novel pathogen, but likely not with one that would have qualified for all the measures incurred. Had we not called for a worldwide pandemic and had we not tested, we would have seen some unusually severe “flu-like” peaks. Very likely a lot of later problems were actually induced by all kinds of measures, but we will never know, because no one cared to know.

I am not convinced that Kennedy is correct on all points. But I am convinced that he has a very important point to make and that people should listen. Having been the subject of various “fact checkers” myself, I can only say: The true name for this fact checking is counter-propaganda. My own study, which I know was well-conducted, was retracted for political reasons (Walach et al., 2021a, 2021b). It was “fact checked” for German TV by a person whose credentials were those of a horse-sports reporter. More questions? Another study, which was admittedly controversial and provocative in its wording, was also illicitly retracted, and then republished after a renewed and complex review process (Walach et al., 2021c, 2021d). We are in the process of publishing a letter pointing out that our analysis still stands (Walach et al., 2022 in press).

This is where the “vaccines” come in. They are not vaccines, but genetic preventive interventions, and as such

it is not even possible, let alone intellectually correct, to compare them with other vaccines. These interventions are associated with a number of deaths in the Vaccine Adverse Reaction (VAERs) database that is about by a factor 100 times higher than that of all other vaccines together (Seneff et al., 2022). It is precisely the taboo to discuss this that made me extremely skeptical of the whole mainstream narrative. They do not prevent transmission (Franco-Paredes, 2022). They have been around for a long time. One of my interview partners, who worked with the technology for 15 years said to me that they have abandoned the technology, because it is not controllable, how much of an end-product is produced, and the cationic lipid nanoparticles which are used for packaging the mRNA are toxic in themselves and do not have a regulatory approval because of that. Nowhere in the world. It is only possible through emergency approval that they could be marketed. And should such a technology be both safe and applicable without discussion and without criticism allowed? We are not talking about vaccines. We are talking about a completely novel pharmaceutical technology never used in humans before that has been admitted to market through emergency approval. This emergency approval was legally only possible because a point was made that there is no treatment available. As McCullough has made amply clear, this statement is false (McCullough et al., 2021).

So: What would you say, when you sit in front of that heap of information? There is a pandemic, which is hyped. There is a doctored situation, where “no treatment” is stipulated, which is clearly wrong. There is a novel technique magically jumping out of the hat, the mRNA-vaccine technology, that has been abandoned by many because of its unclear and potentially dangerous nature. This novel technique is suddenly without alternatives. And any criticism is banned. Well, I tell you what I did: I started to think and to read and to be very skeptical. And in such a situation Kennedy’s book is an eye-opener. It might not be correct in every respect. It might contain a lot of overstatement. It might even contain some false accusations (although I think a man in his position will be careful not to open himself up to libel suits by making careless statements). But by and large, it is a useful source of information.

It does rob you of your virginity, and likely in a less lustful way than the original act, but perhaps it is necessary. Unless, of course, you want to keep your trust in the system and your belief in the innocence and correctness of the mainstream narrative. I have shed both.

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