

Dr. Mark Bailey: Virology's Event Horizon

[Virology's Event Horizon](#)

by [Dr. Mark Bailey](#)

April 5, 2024

Along with our allies we have spent the last four years dismantling every aspect of the virus model whether it concerns "isolation", antibodies, genomics, PCR, proteomics, electron microscopy, or animal and human studies. In 2022, I published [A Farewell to Virology](#), to date one of the only treatises that outlines a formal refutation of the entire virus model. This was inspired The Perth Group's 2017 epic [HIV – a virus like no other](#), the most comprehensive document refuting the existence of 'HIV' specifically.

In my recent [webinars](#) with Dr Tom Cowan we have been discussing the scientific method, along with the concepts of independent variables and controlled experiments. Clearly the virologists have resorted to anti-scientific practices to make their various claims including the foundational claim of virus existence.

It motivated me to write an essay specifically addressing the apical logical fallacy in the cell culture technique – something that has been noticed previously but perhaps not formally expressed. The virologists have claimed they perform control experiments and sometimes describe these as 'mock-infected' cultures. In recent months we have also been contacted by people in the 'no virus' community asking whether John Enders inadvertently performed a control experiment in his 1954 measles paper. [Dr Stefan Lanka](#) exposed the lack of a control experiment in this paper in the Stuttgart Higher

Regional Court in 2016 and I make some further comments expanding on this in note 20.

The pivotal issue is that the virologists do not have an independent variable and their experiments cannot make a hypothetical particle real. The 'gold standard' technique for "isolation" cannot possibly determine the presence (or existence) of viruses no matter how they attempt to control it. The paradigm that was created in the 1940s to keep virology alive was dead on arrival because the technique relies on a reification fallacy and logical errors that disqualify the entire process from being scientific.

We have had some feedback that although fairly brief, this paper is difficult to follow in some parts. (It helps to read all the endnotes.) If you have not already seen it, I would recommend watching Kate Sugak's excellent presentation at the XXII Russian Scientific Conference: "[The scientific vacuum: The scientific method and its absence in virology](#)". Kate covers the crucial scientific considerations articulated in my paper in an easy to follow format and shows that the virologists have nowhere left to hide.

I would like to acknowledge [Christine Massey](#) and [Steve Falconer](#) for their helpful suggestions.

[Please download the paper below.](#)



Loading...



Taking too long?



Reload document

|  [Open in new tab](#)

[Download \[2.00 MB\]](#)

[Connect with Dr. Mark Bailey \(and Dr. Sam Bailey\)](#)

Cover image based on creative commons work of [naobim](#) & [OpenClipart-Vectors](#)

Tom Cowan & Mark Bailey Issue a New Challenge for Virus-Pushers

[New Challenge for Virus-Pushers](#)

It Should Be So Easy for You, if “Viruses” Really Exist

by [Christine Massey](#), [Christine Massey’s “germ” FOI Newsletter](#)

March 7, 2024

Greetings and Best Wishes,

Drs. Tom Cowan and Mark Bailey have issued a new “virus” challenge ([here](#)).

“Please note that the requirements for submission can be found at the following timecodes in [this video](#): 2:16-11:20.”

Tom published a 5 minute follow up the next day: **You can do it, send us your videos ([here](#))**.

Please share this challenge with any/all prominent virus-

pushers! Below is the email address for submissions:

*"If you or someone you know believe that viruses have been isolated and have a rebuttal or scientific study to show us, **please submit a short paper or a short video to conversationswithdrcowan@gmail.com** and we will review & address these in a future webinar. Please note that the requirements for submission can be found in [this video](#)."*

Background:

Scientific thinking applied to "virus" isolation – Tom and Mark, February 29, 2024 ([here](#)).

And let's not forget:

[Samuel Eckert's](#) long-standing offer of a [1.5 million Euro reward](#) for any:

"virologist who presents scientific proof of the existence of a corona virus, including documented control experiments of all steps taken in the proof"

Tip: Don't attempt to collect without providing any evidence [like Professor Ulrike Kämmerer!](#)

And we still have the [Settling The Virus Debate Challenge](#) from Tom, Mark and 18 additional signatories including Professor Timothy Noakes and former Pfizer respiratory division VP, Michael Yeadon, issued in July 2022.

Source document: <https://drsambailey.com/resources/settling-the-virus-debate/>

14 July 2022

SETTLING THE VIRUS DEBATE

*"A small parasite consisting of nucleic acid (RNA or DNA) enclosed in a protein coat that can replicate only in a susceptible host cell."*¹

It has been more than two years since the onset of the "corona" crisis, which changed the trajectory of our world. The fundamental tenet of this crisis is that a deadly and novel "virus", SARS-CoV-2, has spread around the world and negatively impacted large segments of humanity. Central to this tenet is the accepted wisdom that viruses, defined as replicating, protein-coated pieces of genetic material, either DNA or RNA, exist as independent entities in the real world and are able to act as pathogens. That is, the so-called particle

*Tip: Don't disqualify yourself as "scientist" [Kevin McCairn](#) did, by **publicly** insisting that your lab participate in a challenge where the labs must be **blinded** to each other's identities!*

FOIs Summary

Freedom of Information Responses reveal that health/science institutions around the world (220 and counting!) have no record of SARS-COV-2 (the alleged covid virus) isolation/purification, anywhere, ever:

<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-around-the-world-have-no-record-of-sars-cov-2-isolation-purification/>

Excel file listing 220 institutions:

<https://www.fluoridefreepeel.ca/wp-content/uploads/2023/11/Institution-list-for-website.xls>

FOI responses re other imaginary viruses (HIV, avian influenza, HPV, Influenza, Measles, etc., etc., etc.):

<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-have-no-record-of-any-virus-having-been-isolated-purified-virology-isnt-a-science/>

FOIs re secretive and unscientifically "mock infected" cells (aka invalid controls) and fabricated "virus genomes":

<https://www.fluoridefreepeel.ca/do-virologists-perform-valid-control-experiments-is-virology-a-science/>

3000+ pages of "virus" FOIs (updated as of December 31, 2022) in 8 compilation pdfs, and my **notarized declaration** re the anti-scientific nature of virology:

<https://tinyurl.com/IsolationFOIs>

Failed freedom of Information responses re contagion:

<https://www.fluoridefreepeel.ca/freedom-of-information-responses-re-contagion/>

Do health and science institutions have **studies proving that bacteria CAUSE disease?**

<https://www.fluoridefreepeel.ca/do-health-authorities-have-studies-proving-that-bacteria-cause-disease-lets-find-out-via-freedom-of-information/>

Because “they” (HIV, influenza virus, HPV, measles virus, etc., etc., etc.) have never been shown to exist, clearly don’t exist and virology isn’t a science.

For truth, freedom and sanity,

Christine

[Connect with Christine Massey](#)

Cover image credit: Abhi_Jacob

Drs. Tom Cowan & Mark Bailey Weighing In on a Recent Paper by a Group of UK Scientists About the “No Virus” Controversy

[Drs. Tom Cowan & Mark Bailey Weighing In on a Recent Paper by](#)

[a Group of UK Scientists About the “No Virus” Controversy](#)

[Webinar with Dr. Mark Bailey on the HART Group: October 11, 2023](#)

by [Dr. Tom Cowan](#) with [Dr. Mark Bailey](#)

October 11, 2023

In this webinar, Dr. Tom Cowan & Dr. Mark Bailey discuss the HART Group in England and how they have weighed in on the no-virus controversy.

They review The HART Group’s latest article, titled “Why HART Uses The Virus Model.”

This article can be found here: <https://www.hartgroup.org/virus-model/>

Video available at [Odysee](#) & [Rumble](#).

[Truth Comes to Light](#) editor’s note:

Drs. Tom Cowan and Mark Bailey challenge an article posted on October 4, 2023 by HART (a group of scientists in the UK) titled “Why HART uses the virus model – Arguments against ‘the virus doesn’t exist’ “.

Tom and Mark go over all key points made in the article.

It’s clear that the HART group has no idea what has been revealed in the research done by those who been exposing the false foundation of virology.

HART has somehow missed a foundational point of the “no virus” research – that no infectious “virus” has ever been isolated in the entire history of virology and that the “no virus”

research shines a light on the fraud of all so-called infectious viruses.

Here is how HART group describes themselves at their website:

“HART is a group of highly qualified UK doctors, scientists, economists, psychologists and other academic experts. We came together over shared concerns about policy and guidance recommendations relating to the COVID-19 pandemic.

We continue to be concerned about the lack of open scientific debate in mainstream media and the worrying trend of censorship and harassment of those who question the narrative. Science without question is dogma.”

Read and download PDF of Mark Bailey’s 67-page paper [“A Farewell to Virology \(Expert Edition\)”](#)

Also referenced is the great work of [Mike Stone](#).

[Connect with Dr. Tom Cowan](#)

[Connect with Dr. Mark Bailey](#)

Cover image credit: [Alexandra Koch](#)

Drs. Sam and Mark Bailey on the Existence of Viruses

[Drs. Sam and Mark Bailey on the Existence of Viruses](#)

Everything we've been taught about viruses and virology is completely wrong

by [Patrick Timpone](#), [One Radio Network](#)

August 30, 2023

About Dr. Sam Bailey: After training and practicing within the medical system for two decades, she commenced a new phase of understanding and promoting health as a wider concept.

In 2019, Sam launched her YouTube channel exposing the hidden scientific truths about health.

A few years later and after taking the red pill, Bailey's channel has become a runaway hit with 20+ million views and 300,000+ subscribers to help people understand the simple ways they can take control of their health.

She is the co-author of *Virus Mania*, which examines how the medical industry continually invents epidemics to make billion-dollar profits at our expense.

About Dr. Mark Bailey: Mark is the husband of Dr Sam Bailey and when you see one of them, you are really seeing both of them. They started working together when they first met in 2007 and have been a close team ever since. Mark and Sam are based in New Zealand and have three children together.

Since early 2020 he has been the duo's chief researcher with a focus on microbiology, the existence of viruses, as well as historical and epistemological issues within medical science.

Is There Anything Floating in the Air – Trying to Infect Us?

[Connect with One Radio Network](#)

There Was No Pandemic: Denis Rancourt Testimony at National Citizens Inquiry Canada

[There Was No Pandemic: Denis Rancourt's Testimony at National Citizens Inquiry Canada](#)

Live video presentation took place on June 28, 2023. Find it at [National Citizens Inquiry CA Rumble](#) channel or [Denis Rancourt Odysee](#) channel.

[There Was No Pandemic](#)

by [Denis G. Rancourt, PhD](#)

June 22, 2023

This is radical.

The essay is based on my May 17, 2023 [testimony for the National Citizens Inquiry](#) (NCI) in Ottawa, Canada, my [894-page book of exhibits](#) in support of that testimony, and our continued research.

I am an accomplished interdisciplinary scientist and

physicist, and a former tenured Full Professor of physics and lead scientist, originally at the University of Ottawa.

I have written over 30 scientific reports relevant to COVID, starting April 18, 2020 for the Ontario Civil Liberties Association (ocla.ca/covid), and recently for a new non-profit corporation (correlation-canada.org/research). Presently, all my work and interviews about COVID are documented on my website created to circumvent the barrage of censorship (denisrancourt.ca).

In addition to critical reviews of published science, the main data that my collaborators and I analyse is all-cause mortality.

All-cause mortality by time (day, week, month, year, period), by jurisdiction (country, state, province, county), and by individual characteristics of the deceased (age, sex, race, living accommodations) is the most reliable data for detecting and epidemiologically characterizing events causing death, and for gauging the population-level impact of any surge or collapse in deaths from any cause.

Such data is not susceptible to reporting bias or to any bias in attributing causes of death. We have used it to detect and characterize seasonality, heat waves, earthquakes, economic collapses, wars, population aging, long-term societal development, and societal assaults such as those occurring in the COVID period, in many countries around the world, and over recent history, 1900-present.

Interestingly, none of the post-second-world-war Centers-for-Disease-Control-and-Prevention-promoted (CDC-promoted) viral respiratory disease pandemics (1957-58, "H2N2"; 1968, "H3N2"; 2009, "H1N1 again") can be detected in the all-cause mortality of any country. Unlike all the other causes of death that are known to affect mortality, these so-called pandemics did not cause any detectable increase in mortality, anywhere.

The large 1918 mortality event, which was recruited to be a textbook viral respiratory disease pandemic (“H1N1”), occurred prior to the inventions of antibiotics and the electron microscope, under horrific post-war public-sanitation and economic-stress conditions. The 1918 deaths have been proven by histopathology of preserved lung tissue to have been caused by bacterial pneumonia. This is shown in several independent and non-contested published studies.

My first report analysing all-cause mortality was published on June 2, 2020, at censorship-prone Research Gate, and was entitled [“All-cause mortality during COVID-19 – No plague and a likely signature of mass homicide by government response”](#). It showed that hot spots of sudden surges in all-cause mortality occurred only in specific locations in the Northern-hemisphere Western World, which were synchronous with the March 11, 2020 declaration of a pandemic. Such synchronicity is impossible within the presumed framework of a spreading viral respiratory disease, with or without airplanes, because the calculated time from seeding to mortality surge is highly dependent on local societal circumstances, by several months to years. I attributed the excess deaths to aggressive measures and hospital treatment protocols known to have been applied suddenly at that time in those localities.

The work was pursued in greater depth with collaborators for several years and continues. We have shown repeatedly that excess mortality most often refused to cross national borders and inter-state lines. The invisible virus targets the poor and disabled and carries a passport. It also never kills until governments impose socio-economic and care-structure transformations on vulnerable groups within the domestic population.

Here are my conclusions, from our detailed studies of all-cause mortality in the COVID period, in combination with socio-economic and vaccine-rollout data:

1. If there had been no pandemic propaganda or coercion, and governments and the medical establishment had simply gone on with business as usual, then there would not have been any excess mortality
2. There was no pandemic causing excess mortality
3. Measures caused excess mortality
4. COVID-19 vaccination caused excess mortality

Regarding the vaccines, we quantified many instances in which a rapid rollout of a dose in the imposed vaccine schedule was synchronous with an otherwise unexpected peak in all-cause mortality, at times in the seasonal cycle and of magnitudes that have not previously been seen in the historic record of mortality.

In this way, we showed that the vaccination campaign in India caused the deaths of 3.7 million fragile residents. In Western countries, we quantified the average all-ages rate of death to be 1 death for every 2000 injections, to increase exponentially with age (doubling every additional 5 years of age), and to be as large as 1 death for every 100 injections for those 80 years and older. We estimated that the vaccines had killed 13 million worldwide.

If one accepts my above-numbered conclusions, and the analyses that we have performed, then there are several implications about how one perceives reality regarding what actually did and did not occur.

First, whereas epidemics of fatal infections are very real in care homes, in hospitals, and with degenerate living conditions, the viral respiratory pandemic risk promoted by the USA-led "pandemic response" industry is not a thing. It is most likely fabricated and maintained for ulterior motives, other than saving humanity.

Second, in addition to natural events (heat waves, earthquakes, extended large-scale droughts), significant

events that negatively affect mortality are large assaults against domestic populations, affecting vulnerable residents, such as:

- sudden devastating economic deterioration (the Great Depression, the dust bowl, the dissolution of the Soviet Union),
- war (including social-class restructuring),
- imperial or economic occupation and exploitation (including large-scale exploitative land use), and
- the well-documented measures and destruction applied during the COVID period.

Otherwise, in a stable society, mortality is extremely robust and is not subject to large rapid changes. There is no empirical evidence that large changes in mortality can be induced by sudden appearances of new pathogens. In the contemporary era of the dominant human species, humanity is its worst enemy, not nature.

Third, coercive measures imposed to reduce the risk of transmission (such as distancing, direction arrows, lockdown, isolation, quarantine, Plexiglas barriers, face shields and face masks, elbow bumps, etc.) are palpably unscientific; and the underlying concern itself regarding “spread” was not ever warranted and is irrational, since there is no evidence in reliable mortality data that there ever was a particularly virulent pathogen.

In fact, the very notion of “spread” during the COVID period is rigorously disproved by the temporal and spatial variations of excess all-cause mortality, everywhere that it is sufficiently quantified, worldwide. For example, the presumed virus that killed 1.3 million poor and disabled residents of the USA did not cross the more-than-thousand-kilometer land border with Canada, despite continuous and intense economic exchanges. Likewise, the presumed virus that caused synchronous mortality hotspots in March-April-May 2020 (such

as in New York, Madrid region, London, Stockholm, and northern Italy) did not spread beyond those hotspots.

Interestingly, in this regard, the historical seasonal variations (12 month period) in all-cause mortality, known for more than 100 years, are inverted in the northern and southern global hemispheres, and show no evidence of “spread” whatsoever. Instead, these patterns, in a given hemisphere, show synchronous increases and decreases of mortality across the entire hemisphere. Would the “spreading” causal agent(s) always take exactly 6 months to cross into the other hemisphere, where it again causes mortality changes that are synchronous across the hemisphere? Many epidemiologists have long-ago concluded that person-to-person “contact” spreading of respiratory diseases cannot explain and is disproved by the seasonal patterns of all-cause mortality. Why the CDC *et al.* are not systematically ridiculed in this regard is beyond this scientist’s comprehension.

Instead, outside of extremely poor living conditions, we should look to the body of work produced by Professor Sheldon Cohen and co-authors (USA) who established that two dominant factors control whether intentionally challenged college students become infected and the severity of the respiratory illness when they are infected:

- degree of experienced psychological stress
- degree of social isolation

The negative impact of experienced psychological stress on the immune system is a large current and established area of scientific study, dutifully ignored by vaccine interests, and we now know that the said impact is dramatically larger in elderly individuals, where nutrition (gut biome ecology) is an important co-factor.

Of course, I do not mean that causal agents do not exist, such as bacteria, which can cause pneumonia; nor that there are not

dangerous environmental concentrations of such causal agents in proximity to fragile individuals, such as in hospitals and on clinicians' hands, notoriously.

Fourth, since our conclusion is that there is no evidence that there was any particularly virulent pathogen causing excess mortality, the debate about gain-of-function research and an escaped bioweapon is irrelevant.

I do not mean that the Department of Defence (DoD) does not fund gain-of-function and bioweapon research (abroad, in particular), I do not mean that there are not many US patents for genetically modified microbial organisms having potential military applications, and I do not mean that there have not previously been impactful escapes or releases of bioweapon vectors and pathogens. For example, the Lyme disease controversy in the USA may be an example of a bioweapon leak (see Kris Newby's 2019 book "Bitten: The Secret History of Lyme Disease and Biological Weapons").

Generally, for obvious reasons, any pathogen that is extremely virulent will not also be extremely contagious. There are billions of years of cumulative evolutionary pressures against the existence of any such pathogen, and that result will be deeply encoded into all lifeforms.

Furthermore, it would be suicidal for any regime to vehemently seek to create such a pathogen. Bioweapons are intended to be delivered to specific target areas, except in the science fiction wherein immunity from a bioweapon that is both extremely virulent and extremely contagious can be reliably delivered to one's own population and soldiers.

In my view, if anything COVID is close to being a bioweapon, it is the military capacity to massively, and repeatedly, rollout individual injections, which are physical vectors for whichever substances the regime wishes to selectively inject into chosen populations, while imposing complete compliance

down to one's own body, under the cover of protecting public health.

This is the same regime that practices wars of complete nation destruction and societal annihilation, under the cover of spreading democracy and women's rights. And I do not mean China.

Fifth, again, since our conclusion is that there is no evidence that there was any particularly virulent pathogen causing excess mortality, there was no need for any special treatment protocols, beyond the usual thoughtful, case-by-case, diagnostics followed by the clinician's chosen best approach.

Instead, vicious new protocols killed patients in hotspots that applied those protocols in the first months of the declared pandemic.

This was followed in many states by imposed coercive societal measures, which were contrary to individual health: fear, panic, paranoia, induced psychological stress, social isolation, self-victimization, loss of work and volunteer activity, loss of social status, loss of employment, business bankruptcy, loss of usefulness, loss of caretakers, loss of venues and mobility, suppression of freedom of expression, etc.

Only the professional class did better, comfortably working from home, close to family, while being catered to by an army of specialised home-delivery services.

Unfortunately, the medical establishment did not limit itself to assaulting and isolating vulnerable patients in hospitals and care facilities. It also systematically withdrew normal care, and attacked physicians who refused to do so.

In virtually the entire Western World, antibiotic prescriptions were cut and maintained low by approximately 50%

of the pre-COVID rates. This would have had devastating effects in the USA, in particular, where:

- the CDC's own statistics, based on death certificates, has approximately 50% of the million or so deaths associated with COVID having bacterial pneumonia as a listed comorbidity (there was a massive epidemic of bacterial pneumonia in the USA, which no one talked about)
- the Southern poor states historically have much higher antibiotic prescription rates (this implies high susceptibility to bacterial pneumonia)
- excess mortality during the COVID period is very strongly correlated ($r = +0.86$) – in fact proportional to – state-wise poverty

Sixth, since our conclusion is that there is no evidence that there was any particularly virulent pathogen causing excess mortality, there was no public-health reason to develop and deploy vaccines; not even if one accepted the tenuous proposition that any vaccine has ever been effective against a presumed viral respiratory disease.

Add to this that all vaccines are intrinsically dangerous and our above-described vaccine-dose fatality rate quantifications, and we must recognize that the vaccines contributed significantly to excess mortality everywhere that they were imposed.

In conclusion, the excess mortality was not caused by any particularly virulent new pathogen. COVID so-called response in-effect was a massive multi-pronged state and iatrogenic attack against populations, and against societal support structures, which caused all the excess mortality, in every jurisdiction.

It is only natural now to ask “what drove this?”, “who benefited?” and “which groups sustained permanent structural

disadvantages?”

In my view, the COVID assault can only be understood in the symbiotic contexts of geopolitics and large-scale social-class transformations. Dominance and exploitation are the drivers. The failing USA-centered global hegemony and its machinations create dangerous conditions for virtually everyone.

[Connect with Denis Rancourt](#)

Cover image based on creative commons work of MiroslavaChrienova, pixabay

[TCTL](#) editor's note: See the Bailey's latest video on Lyme disease as an alternate viewpoint to Denis Rancourt's speculation about Lyme disease:

[The Lyme Disease Lie](#)

Why Pathogens Don't Exist

[Why Pathogens Don't Exist](#)

by [Dr. Sam Bailey](#)

April 29, 2023

Many of us who can see that [viruses don't exist](#), find it easier to do so as virology is an off-shoot of [germ theory](#).

If germ “theory” is wrong, there is no sense in pursuing

alleged disease-causing sub-microscopic organisms. That's why the germ theorists don't want us scratching beneath the surface of the so-called '[science](#)' involving bacteria either.

Let's have a look at why the concept of "pathogens" is a complete fail on their own terms from [Koch's Postulates](#) through to some modern day animal experiments.

[Connect with Drs. Sam \(Samantha\) & Mark Bailey](#)

See related:

[*A Farewell to Virology \(Expert Edition\)*](#)

[*Drs. Tom Cowan, Mark & Samantha Bailey, Andrew Kaufman: Why Are We Doing This?*](#)

[*Dr. Tom Cowan With Dr. Mark Bailey: "SARS-CoV-2 Virus Could Never Have Been Leaked From a Lab Because No Such Particle Has Been Proven to Exist. Ever."*](#)

Drs. Tom Cowan, Mark &

Samantha Bailey, Andrew Kaufman: Why Are We Doing This?

[Drs. Tom Cowan, Mark & Samantha Bailey, Andrew Kaufman: Why Are We Doing This?](#)

~~~

*“It is also clear that the dramatic events of the past three years, events that have devastated the lives of many people all over the world, are based on this very misconception that so-called pathogenic viruses exist. This misconception has been around for a very long time, and it has led to damaging public health measures, the most notorious being vaccines, which have themselves harmed and killed millions of animals and people during their long and sordid history.*

*–This carnage needs to stop.”*

~~~

TCTL editor's note:

In the video below, Samantha Bailey reads the written statement “Why Are We Doing This?” which was signed by Tom Cowan, Andrew Kaufman, Mark and Samantha Bailey.

Following that reading, each of the four makes a brief personal statement about why they continue to speak out about lies at the foundation of virology.

The written statement, shared below, can be found at [Tom Cowan's website](#).

Transcript of the individual statements is provided by [Truth Comes to Light](#).

Why Are We Doing This?: The Written Statement

Sadly, the level of rancor between those in the “freedom” community taking the “no-virus” position and those taking the “pro-virus” position has reached higher and higher levels.

Videos, Instagram posts and tweets are put out by both sides claiming to “debunk” the other side or sometimes to just call names.

Mikki Willis, the producer and director of the documentary series Plandemic, has created a new video urging unity among those who claim to be on the side of freedom, along with a subtle accusation that dissenters against this unity are classic disinformation agents.

Given this background, we, as some of the recognized leaders of the “no-virus team,” thought it would be a good opportunity to reconnect and even restate why we are doing this.

Why we will not just be good team players and participate in the growing worldwide movement fighting for the universal principles of freedom, bodily autonomy and the ability to guide one’s life based on one’s own beliefs and decisions? Why keep speaking out?

It seems obvious to us and, in fact, has been a guiding principle throughout our entire lives that a life based in freedom and integrity must have a solid, factual foundation. In other words, if the foundation is not based on the truth, as best we can see it, our entire lives are based on mistruths and are in danger of collapse at any moment.

Imagine building a relationship, a family, a homestead based

on love between two people when the reality is that, rather than love, there is distrust, suspicion and even ill will. Sooner or later, that life will collapse into ruins.

This is the same with a financial system based on fiat currency, an agricultural system based on inattention to the health of the soil, or a medical system based on anti-scientific medical hypotheses.

After careers of examining medical research and theories and three years of intensive investigation into the question of whether particles or, perhaps better said, entities known as viruses actually exist, it is our clear conclusion that no such particle has ever been shown to exist, let alone cause any disease in plants, animals or people. For us, this conclusion stands as a clear fact.

It is also clear that the dramatic events of the past three years, events that have devastated the lives of many people all over the world, are based on this very misconception that so-called pathogenic viruses exist. This misconception has been around for a very long time, and it has led to damaging public health measures, the most notorious being vaccines, which have themselves harmed and killed millions of animals and people during their long and sordid history.

-This carnage needs to stop.

People need to experience the world with new eyes and with a new concept of life, biology and health. This new conception can begin only when we realize, once and for all, that the idea of contagious, pathogenic viruses, or viral-like entities of any sort – natural, lab created, clones or otherwise – is simply a scientific misconception, or possibly a fraud.

Why we are doing this is straightforward: It's so that no woman, man, child or animal ever has to be subjected again to abuse based on a long, bankrupt theory of biology and medicine.

We have nothing personally to gain from this quest. No prestigious awards are coming our way, and we likely will get nothing but further scorn and derision from colleagues, public institutions, and the general media.

Yet, when we think of our children, grandchildren, our friends, our families, our beloved animals, and animals in labs who are tortured and killed in this clearly futile effort to demonstrate the “reality” of viruses, everything in our being cries out, “this must stop.”

Therefore, we ask all people of good will to accept the following challenge. Please send us any genuine scientific information that demonstrates that viruses exist and cause disease.

We are not interested in any comments about our motivations or the consequences of our quests for us personally. Absent that evidence, we and our good friends will keep going. We believe that the future for all of us depends on it.

Dr. Thomas Cowan

Dr. Andrew Kaufman

Drs. Samantha & Mark Bailey

Time marker 5:03 – **Dr. Tom Cowan:**

So we've been talking a fair amount about why we're doing this. The this being talking about the fact that there's no virus, never had a virus that's been shown to exist or cause any disease.

So what difference does it make?

So there's obviously a whole lot of reasons including all the social distancing and the masks and the viral vaccines

and the devastation of the adults and the lives of children.

But one thing that we haven't, unfortunately, talked about much is its effect on the animals and the widespread frank torture and mutilation of millions of animals in labs and so-called science experiments all over the world.

And for whatever reason, I hadn't appreciated this so much until I actually have animals of my own. And I think you could see our three cats and six chickens and we're getting three goats this week.

When you realize all the mutilated animals, the ferrets with the cell culture stuffed down their throats, the 15,000 monkeys that were allegedly killed by Sabin to make an ineffective and dangerous polio vaccine.

When you realize all the mutilated dogs that have been left in dumpsters, which I've heard from many people who actually witnessed this themselves, the mice who've been injected with debris into their brain.

And you realize that all these experiments have no possible benefit. They're just basically sadistic, torturing of innocent animals.

And at some point in your life, everything cries out to say this has to stop.

Time marker 7:04 – Dr. Andrew Kaufman:

Hello, I'm Dr. Andrew Kaufman. And today I'm here to answer the question why is it important to me to tell the whole truth about viruses? Meaning that they don't actually exist or cause disease.

When faced with a lot of opposition and resistance to this message, you know, why am I communicating this over and over and sticking to this position.

And my answer is simple and I can answer in one word which is justice. But let me explain.

So if we look up the definition of justice, it means the maintenance or establishment of that which is just.

And I have here the definition of the word just from Merriam Webster: "Having a basis in or conforming to fact or reason." Fact or reason.

So those are the two principal aspects that need to be established and known in order to bring about justice. Fact and Reason.

Now justice, for me, is a guiding factor in my life's work or my mission.

What I would want to achieve and leave as my legacy on earth at the end of my life is related to bringing about justice.

So earlier in my career, this led me to the specialty of forensic psychiatry because I had learned that there was a great injustice perpetrated on the mentally ill individuals of the world. And this was so-called the deinstitutionalization movement which took people out of mental institutions – which at least were established with some purpose of helping and supporting and bettering those individuals – into the homeless crisis as well as jails and prisons.

So I was specifically going to try and help those mentally ill individuals who were essentially warehoused in jails and prisons, even without perpetrating any immoral crimes.

So many of them are there for things, because they were homeless, for example. So when it was really cold out, they went inside a storage facility to stay warm and escape frostbite. But that was trespassing so they ended up

incarcerated, for example. And I've seen individuals in that scenario.

So this principle of justice has been a guiding force for me in my life. And it's no different in the era of covid, where as I wanted to use fact and reason to make an opinion and see what is just with relationship to the announcement of this pandemic which occurred in 2020. And so, of course, I used my reasoning abilities to establish what are the facts.

And that led me to look at the initial fact, which was the establishment of this so-called virus that was causing this pandemic. Everything downstream of that was based upon this assumption.

And what I found out was that this assumption did not have a factual basis. And I simply applied logic and reason, and application of the scientific method to see that the experiments used to establish this basis of a new disease were simply unscientific and false.

And this helped me, of course, have a unique understanding of everything that occurred over the past several years. And I could easily look through the lens of judgment and see what was just and what was unjust in terms of people's reactions, especially the government and various industries.

And this leads ultimately to holding the perpetrators of this tyranny accountable.

And one of the criticisms that has come from some of the health freedom leaders have been that if we look at the truth that there was no virus, that somehow that lets people like Anthony Fauci off the hook. But it's actually the opposite because until we establish a factual basis of the crimes that were committed – and namely, in my opinion, they were the complete fabrication of an imaginary new

disease that allowed justification of tyrannical policies that reduce freedom and inhibited commerce and allowed all types of manipulation to occur.

And we, to this day, don't really know who are the main leaders behind this psychological operation that established this false disease, not based on fact. But perhaps if we hold people like Anthony Fauci accountable for participating in this charade that we can extract information and find out who the originators are. And that would be the only way to establish a true justice and accountability for what we've experienced.

And I know that going forward it continues to be the utmost important element in our analysis is to establish the facts and to use reasoning to understand what's going on.

And of course this is true, especially with respect to our health.

So I hope this provides some inspiration to see how important it is to really get to the bottom of this issue.

Time marker 13:10 – **Dr. Mark Bailey:**

For more than three years I have researched the virus hypothesis, digesting virology textbooks and thousands of publications – from Ivanovsky's claimed tobacco mosaic virus in 1903 through to Fan Wu's claimed novel coronavirus in early 2020.

Virology's world is arcane and most people have barely scratched the surface, content to believe viruses exist and often outraged that we would question such a thing.

However, we did question and haven't stopped after we broke away from our conventional training and examined this issue for ourselves.

When I completed **A Farewell to Virology**, even I was

surprised at the patent lack of evidence for these alleged infectious particles. It wasn't just a few areas where the virologist evidence was lacking. It was in every area.

The techniques have shifted over the past century as their own experiments have consistently refuted themselves.

Now their remaining "evidence" lies in inadequate methodologies, uncontrolled studies and media releases.

Some time ago, we witnessed a move away from genuine experimental studies and into what I suspect is their final resort – genomics and proteomics.

But as I wrote in *A Farewell to Virology*, this approach is built on bankrupt foundations and will only delay the wider realization that the virus model is done for.

In the meantime, the carnage will continue for those still inside the viral paradigm. Experiencing disease, detecting genetic sequences, looking at electron microscopy images or obtaining test results – whether they be through the PCR or alleged antibodies – do not require the existence of viruses, as we and others have repeatedly exposed.

Mankind can make up stories to explain these various phenomena, but cannot change the underlying principles, no matter how sophisticated the technology.

I don't know how much of the virus fallacy is a misconception, and how much is outright fraud.

It probably doesn't matter because what is important is that more people are waking up to the fallacy and rejecting the virus and germ theory models outright.

Like our family, they have worked out that none of the touted solutions, whether they be public health measures, vaccines or drugs, offer any benefit to our well-being.

They can see the destruction to humanity, the animals and the environment based on this fraudulent war against imaginary infectious particles.

The real enemy is fear and ignorance, something each of us must overcome. Our world does not need to be feared, with the insight that nature does not make mistakes. And this divine biology is always pro-life and for our benefit.

We may still be in the minority, but we are already victorious as we share this new freedom, wisdom and prosperity with the next generation.

Time marker 16:10 – Dr. Samantha Bailey

In 2020, I first started questioning the covid-19 fraud because I could see that people were fearing for their lives.

The public were being told to stay indoors, to obtain food only from corporate outlets, to avoid relatives and neighbours, all while staying close to their phones and TVs to keep up to date with government announcements.

The fear of the supposed virus was clearly out of proportion with reality. My gut feeling was that I had to try to reduce people's fear by researching the science honestly and presenting my findings to anyone that would listen.

Our research into SARS-CoV-2 quickly morphed into searching for evidence for the existence of any virus. By mid 2020, it was apparent to us that the key scientific evidence was absent and the level of the fraud was massive.

The powers that shouldn't be had been building up to the staging of a huge pandemic like covid-19 for decades. Finally, they had their formula correct and almost everyone was complying with the new totalitarian rule under the

mistaken belief of contagion.

The key to unravelling the fraud lay with explaining the viral delusion as well as the lies of germ theory to allay the public's fear.

I investigate the science and follow the trails wherever they may lead. I then release my findings to the public so that I can sleep at night.

I want my children to have a life where they do not live in fear of nature, where they can understand the true causes of disease and how to be healthy through right thinking and right living.

It is a joy to watch them grow to their full potential and I hope that many more people will share the benefits of ignoring the virus model and its associated carnage.

[Connect with Dr. Tom Cowan](#)

[Connect with Dr. Andrew Kaufman](#)

[Connect with Drs. Samantha & Mark Bailey](#)

Cover image credits: [Bohun_pl](#) & [PublicDomainPictures](#)

'No Virus' Is International

['No Virus' Is International](#)

"Our instincts led us to go beyond our medical textbooks and establishment microbiology training, and we were soon

immersed in the second English edition of Virus Mania.

“The book shocked us. Biology wasn’t just a bit dodgy, it was fraudulent.

“Pathogenic viruses were invented boogeymen that had never been shown to exist in scientific experiments, let alone cause disease.”

No Virus Is International

by Dr. Sam Bailey

March 7, 2023

People around the world are becoming more aware of the ‘no virus’ argument as the “science” of virology has been exposed. However, there is often a language barrier when it comes to reaching some countries. Many of the best-known critics of virology are in the English-speaking world and have developed strong alliances with large followings.

The good news is that the movement for truth is truly international and this video will look at some of the advancements being made in regions that are perhaps lesser known to most of our English-speaking audience.

And could the madness of COVID-19 end up bringing the world closer together?...

References

1. [Virus Mania](#), 3rd English edition, 2021
2. ‘[HIV – A Virus Like No Other](#)’ – The Perth Group
3. <https://viroliegy.com/>
4. ‘[FOIs reveal that health/science institutions around the world \(212 and counting!\) have no record of SARS-COV-2 isolation/purification, anywhere, ever](#)’ – Christine

Massey

5. [Spacebusters](#) – Steve Falconer
6. [The Viral Delusion](#) – Mike Wallach
7. [‘A Farewell to Virology’](#) – Dr Mark Bailey
8. The [‘Settling the Virus Debate’](#) statement – 14 Jul 2022

Transcript and related links prepared by [Truth Comes to Light](#):

I’ll be the first to admit that those of us in the English-speaking world can be in the dark when it comes to literature and interviews and other languages. This affects all manner of topics, of course. But this video will focus on the international spread of the ‘no virus’ issue. And while English material is often translated into other languages – for example, Virus Mania is now available in seven languages, with more in development – translations are often less available in the other direction.

I’m also going to give a shout out to perhaps one of the lesser-known teams that has been hammering their country’s government for years over the lack of evidence for SARS-CoV-2 and COVID-19.

Let’s find out who they are and how they have exposed their public office holders on every aspect of the alleged science of virology and pandemics.

For my husband Mark and I, our first introduction to the ‘no virus’ position was in early 2020. The COVID-19 production alerted us that something was badly wrong with virology. Our instincts led us to go beyond our medical textbooks and establishment microbiology training, and we were soon immersed in the second. English edition of Virus Mania.

The book shocked us. Biology wasn’t just a bit dodgy, it was

fraudulent.

Pathogenic viruses were invented boogeymen that had never been shown to exist in scientific experiments, let alone cause disease.

Virus Mania led us to the work of the Perth Group and their detailed scholarship and essays – such as HIV: A Virus Like No Other – showed us that the ‘no virus’ arguments had not only been put forward decades earlier, but were very advanced.

To us, the question became ‘Why have we never seen this before?’ and the inspiration to start our own work into the virus existence issue, as well as going wider into the flawed germ theory and allopathic medical models.

In 2020, my online platforms grew quickly, as did those of Tom Cowan and Andy Kaufman, across the ditch as we say in New Zealand.

Tom Barnett also called out the fraud in 2020 in Australia.

Seasoned campaigners such as Kevin Corbett, David Crowe, Jim West and Amanda Vollmer found a resurgence in interest in their work questioning viruses.

Meanwhile, Mike Stone’s pent-up issues with germ theory and so-called viruses came flooding out in the Virology website.

Christine Massey paused her fluoride work and began publishing the FOIA requests, revealing that no institution in the world had isolated SARS-CoV-2 or any other “virus” for that matter.

Steve Falconer of Spacebusters, pivoted his channel in 2020, and his videos calling out the COVID fraud and contagion myth gained millions of views.

Documentary maker Mike Wallach had known for years that much of allopathic medicine was fraudulent and produced the massive Viral Delusion series in the middle of the scamdemic.

Mark decided to write a fully-referenced, formal refutation of the entire virus model and published the 29,000 word essay, A Farewell to Virology.

These examples show we are spoilt for choice in the English speaking world.

But there are, of course, other prominent members around the world.

In Germany we have the incomparable Dr. Stefan Lanka, the trained biologist who worked out in the 1990s that there were no pathogenic viruses.

Also in Germany are my original inspirations, Torsten Engelbrecht and Dr. Claus Köhnlein, the first person to be on the Dr. Sam Bailey channel.

I was honoured when they asked me to become part of the Virus Mania team in 2020.

Then in Italy, we have the 4th Virus Mania co-author, the one and only Stefano Scoglio.

And the Spanish-speaking world La Quinta Columna have been at the forefront of investigating the contents of the COVID-19 vaccines. And as far as I know, also take the 'no virus' position.

When the "Settling the Virus Debate" statement was launched in July 2022, we had an international alliance of doctors and scientists.

For most of our audience, three of the lesser-known names were likely to be Mufassil Dingankar, Jitendra Banjara, and Sachin Pethkar. These are our friends from India and they have been doing an incredible amount of work with their team to show to India and the world that the Emperor has no virus when it comes to COVID-19 or any other alleged viral disease.

They have collected hundreds of pages of documents with responses from so-called health institutions and politicians in India. They have documented the uncontrolled and unscientific experiments related to alleged virus isolation, electron microscopy and genome sequencing. Starting with Fan Wu, whose infamous 2020 paper they had pointed out that the PCR was not clinically validated, and couldn't be in any case, Because of the failed biological science upstream from the test.

They have even pointed out the financial fraud with the government of India taking out a loan of 1 billion U.S. dollars on the 2nd of April 2020, in the name of the pandemic, placing a further burden on Indian citizens.

Not only this, but the public purse has been used to fund the necessary medical drugs and vaccines and run marketing campaigns of fear.

They have pointed out that cases of COVID-19 are defined by preposterous circular reasoning, due to its non-specific symptoms and flawed testing kits.

Of major concern to the team has been the suppression of natural therapies for illnesses. I love the way they reject the allopathic medical system and state:

"A serious issue is, if any disease/symptom cannot be cured by Allopathy (or the alternate) Medical System, it is declared an incurable disease/symptom or epidemic or pandemic by ignoring the other mainstream medicinal systems such as Ayurveda, Yoga, Naturopathy, Homeopathy, Unani, Siddha etc. at the outset."

I think we should all take up this approach and describe Rockefeller and Pasteur medicine as alternative rather than true medicine.

Much of the overall strategy from our Indian colleagues has

been to focus on the legal aspects of COVID-19 in their country. For example, under the Indian Evidence Act, 1872, the burden of proof is on the government to establish the existence of the alleged SARS-CoV-2 virus in human samples, and its pathogenicity with that sample.

It has become clear that, like virologists around the world, the Indian medical authorities cannot deliver the evidence with any papers that follow the scientific method.

The conclusion from our Indian colleagues and their politely-worded statement:

“This is nothing but a serious medical experiment which is likely a crime against humanity and this act clearly shows that health authorities may have no intention of public health and welfare of citizens of India.”

And while the highest level institution, the Indian Council of Medical Research, claimed they have proof of existence of SARS-CoV-2, they have yet to provide any document to back this up. Hence a demand letter is now being sent to them, as well as the National Institute of Virology and various politicians. It calls on them to provide a public demonstration showing the existence of a virus.

They’ve even opened it up further and have suggested that the demonstration could involve providing the evidence for ANY alleged disease-causing microbe.

So here’s how their demand letter reads.

SUBJECT:

Demand to prove the existence of the alleged SARS-CoV-2 virus (or disease-causing virus). In other words, to prove that the alleged SARS-CoV-2 and the alleged variants (or disease-causing viruses) are real physical entities that are supported with real-time research via public

demonstration and peer reviewed scientific papers. Additionally, to prove that there was a real scientific basis behind this COVID-19 pandemic.

Dear Public Servant,

At the outset, we are very disheartened and unsatisfied with your response. We are referring herewith to your response, which lacks sincerity and shows great negligence/disrespect towards the public. Moreover, it also lacks rationality and scientificity.

YOUR UNSATISFACTORY RESPONSE:

If you diligently read our Open Legal Notice, you would have noticed that we asked you for valid scientific experimental research papers/records/documents to prove the existence of alleged SAR-CoV-2 or disease-causing viruses. However, the scientific research papers that you provided against the RTIs and our correspondences fail to prove the existence of any 'disease-causing virus', including the alleged SAR-CoV-2 virus or its variants, that we showed in our Open Legal Notice (based on scientific principles/methods and rationality.

Furthermore, without providing any valid scientific papers/records/documents to prove your claim (i.e. existence of any disease-causing virus and/or the alleged SAR-CoV-2 virus), you have given a poor logical reply. This, to our surprise, was a kind of response never expected from an esteemed scientific institution such as yours. Therefore, we are now forced-obligated to mandate scientific, rational, and clear-cut answers to our questions."

Therefore, unless you can provide us with a valid scientific proof and/or research papers to prove the existence of the alleged SARS-CoV-2 or its alleged variants, we demand an explicit statement mentioning that

you do not have any such evidence; as you clearly mentioned that you do not have any scientific evidence for disease-causing germs, i.e. disease-causing bacteria, fungi, protozoa, parasites, or any kind of disease-causing microorganism against the RTI attached.

ONE. Your Reply Failed the Scientific Temperament:

As per our present observation/experience and doubt, the absence of valid scientific evidence and the lack of submission of proper science principles/methods in the research work of Virology show that: Through imagination, theory and fear-generating tools like the PPE kit, as well as masks and heavy sophisticated machineries/tools etc, an atmosphere has been created by the virologists fabricating an imaginary entity to be a real one for others.

Virologists are the victim of a misconception (i.e. existence of disease-causing virus), which has been conceived by them and is further spread/propagated by the medical doctors/professionals across the society/public. As a result, people are now suffering from the fear of an imaginary entity. This misconception has been made the basis of almost all the alleged epidemic and pandemics since hundreds of years.

The truth revealed through proper scientific investigation has never been done yet.

Also, after interacting with various scientists/experts from over the world their statements further clarified that existence of disease-causing virus is a misconception:

For instance:

“When cells die, they are broken down into submicroscopic particles, some of which biologists arbitrarily label viruses.”

“Anyone who closely analyzes what virologists actually do in the laboratory to ‘prove’ that these particles they call ‘viruses’ cause disease will easily see the absurdity of their conclusions”

~ Dr. Stefan Lanka, virologist

[mention of paper COVID-19 the virus does not exist. It is confirmed. by Dr. Saeed A. Queshi, PhD.]

Secondly, regarding the PCR/RT-PCR, we already showed in our Open Legal Notice why and how the test is totally irrelevant for the purpose and it’s a misuse of this test that was/is being used for the alleged COVID-19 pandemic purpose. However, you could not clarify our inquiry in your response.

Additionally, we also present herewith excerpts of the laboratory experiment conducted by Dr. Biswaroop Roy Chowdhury and his team to validate the government- approved RT-PCR test for COVID-19.

Excerpts:

Recently from June 15-17, 2022, I and my medical team conducted an experiment wherein we took some fruits, some vegetables, and some animals like rabbit and dog and a few birds like chicken and pigeon. We collected samples of each of them and went to a government- authorised COVID Test Laboratory to run them through the test to understand which of the samples are COVID positive and which of them are COVID negative.

Dr. Biswaroop Roy Chowdhury demonstrated and explained the invalid and irrelevant usage of RT-PCR test kit to detect the unclear nucleic acid and proved that the RT-PCR testing is non-specific for the purpose of diagnosis.

Now it is your responsibility to prove your claim via

practical demonstration. You have claimed in your response that you can prove practically the existence of the alleged SARS-CoV-2 virus (or disease-causing viruses). Therefore, we are eager to participate and witness your practical demonstration, as it is the only way to prove your claim.

If you claim the existence of the disease-causing germ (microbes) we demand to prove your claim via practical demonstration by providing us with the below.

– Date, time and schedule of your practical experimental demonstration.

– Name and location of the laboratory (including wet and dry lab).

-Names of the virologist/scientist/committee who will perform and participate in the demonstration.

Please mention all details of the procedure(s)/steps that you will perform and demonstrate during the practical demonstration.

So, there you have it.

Rest assured that the 'no virus' arguments are being advanced in many countries around the world, including by our friends in India.

Keep the conversation going in the comments. And if you know of other individuals or teams around the world that are doing this work, then let us know.

One of the best things to come out of the plandemic was linking up with people around the world to make new alliances and often friendships.

Let's see if waking more of the world up to the virus fraud might bring even more of us together.

[Connect with Sam Bailey](#)

Cover image based on two creative commons works by [geralt](#)

See related:

[Dr. Stefan Lanka & Dr. Tom Cowan: How We Got Into This Mess – The History of Virology & Deep Medical Deceptions](#)

Taking Away Your Chickens

[Taking Away Your Chickens](#)

by [Dr. Sam Bailey](#)

February 14, 2023

While everyone has been distracted by the [COVID-19 fraud](#), many other aspects of the globalists' agenda have been cooking in the background. One of them is the removal of poultry and eggs from the food supply.

The so-called Avian Flu is being used as the excuse to cull hundreds of millions of birds. It may be a surprise to some people that this is essentially a reboot of a narrative that was first tested two decades ago.

In 2005, a publication blew apart the fraudulent science used to invent a non-existent pandemic. Let's have a look at the paper they don't want you to know about as they attempt to take away your chickens.

References

1. "[Should You Eat Bugs?](#)", Dr Sam Bailey, 24 Sep 2022
2. [Virus Mania](#), 3rd English Edition, 2021
3. "[Avian flu spreading to mammals but what does that mean about the risk to humans?](#)", *Edinburgh Live*, 2 Feb 2023
4. "[Secrets of Influenza](#)", Dr Sam Bailey, 21 Apr 2021
5. "[Avian flu virus H5N1: No proof for existence, pathogenicity, or pandemic potential; non-"H5N1" causation omitted](#)", David Crowe & Torsten Engelbrecht, 20 Dec 2005
6. "[East Lothian bird flu fears as up to 40 dead gannets washed up on beaches](#)", *Edinburgh Live*, 7 Jun 2022
7. "[Bird flu 'spills over' to otters and foxes in UK](#)", *BBC*, 3 Feb 2023
8. "[Mass chicken culling based on "avian influenza outbreaks" just another malicious attack on the FOOD SUPPLY](#)", Mike Adams, 23 Dec 2022
9. "[Bird flu: What is it and what's behind the outbreak?](#)", *BBC*, 3 Feb 2023

[Connect with Dr. Sam Bailey](#)

Artificial Intelligence

Caught Lying About Viruses

[Artificial Intelligence Caught Lying About Viruses](#)

by [Dr. Sam Bailey](#)

January 28, 2023

“Viruses” have been used as a [cover story](#) for over a century now. There are so many vested interests and smoke screens that it can be difficult to get people to look into the “[science](#)” for themselves. They are content to believe second hand accounts from the media, governments and so-called health institutions.

Artificial Intelligence or AI platforms have been on the rise recently and millions of people are now engaging with them. We decided to put some questions about “[viruses](#)” to one of the most powerful chatbots currently in existence – [ChatGPT](#). Are these platforms independent arbiters of truth or have they already been corrupted?

Is Artificial “Intelligence” even possible?

References:

1. “[Secrets of Influenza](#)”, Dr Sam Bailey, 21 Apr 2021
2. “[Spanish Flu](#)”, Wikipedia
3. “[SARS-CoV-2](#)”, PubMed search
4. [Human Action](#), Ludwig von Mises
5. [ChatGPT](#)
6. “[The Measles Myth](#)”, Dr Sam Bailey, 9 Nov 2021
7. “[Stefan Lanka: “Virus, It’s Time To Go.”](#)”, Dr Sam Bailey, 12 Aug 2022
8. “[FLASHBACK: The 5th Annual Fake News Awards! \(2022\)](#)”, James Corbett 22 Jan 2023

9. Nick Cave response on [The Red Hand Files](#)

[Connect with Dr. Sam Bailey](#)

Cover image credit: [geralt](#)

What's Next for mRNA Vaccines?

[What's Next for mRNA Vaccines?](#)

by [Dr. Sam Bailey](#)

January 17, 2022

One of the “goals” of COVID-19 appears to be convincing the public to accept minimally-tested pharmaceutical products. Not only that, but to accept them whenever they are told.

The “novel” mRNA vaccines have bamboozled both medical practitioners and the general public. What these injections do to the body remains largely speculative. However, there is a bigger issue at play and that is the ongoing gaslighting surrounding vaccines, whatever their supposed mechanism of action.

The medico-pharmaceutical industry and it's cronies are trying to keep you on the plantation by keeping their cardinal narratives intact...

References:

1. "[What's next for mRNA vaccines](#)", MIT Technology Review, 5 Jan 2023
2. "[PCR Pandemic: Interview with Virus Mania's Dr Claus Köhnlein](#)", Dr Sam Bailey, 27 Oct 2020
3. Dissolving Illusions, Suzanne Humphries MD, Roman Bystryanyk, 2013
4. "[Ten Great Public Health Achievements – United States, 1900-1999](#)", CDC, 2 Apr 1999
5. "[The Future of Vaccines](#)", Dr Sam Bailey, 9 Jun 2022
6. [Economics in One Lesson](#), Henry Hazlitt, 1946
7. "[The 5 stages of vaccine development](#)", Wellcome Trust
8. "[The COVID-19 Fraud & War on Humanity](#)", Dr Mark Bailey & Dr John Bevan-Smith, 2021
9. [Denis Rancourt interview](#), GigaohmBiological
10. "[Bayer President: The mRNA Vaccines Are Gene Therapy](#)", [HoweStreet.com](#)
11. [Stefano Scoglio on mRNA vaccines](#), 2 Nov 2022
12. WHO Tweet – [Peter Hotez video](#), 15 Dec 2022

Connect with Drs. Samantha & Mark Bailey – [website](#) – [substack](#)
– [odysee](#)

Transcript prepared by [Truth Comes to Light](#) editor:

Video narrated by [Dr. Sam Bailey](#):

There is nothing like a discussion about vaccines to end friendships, make your family doctor go red in the face, or result in millions of hours of wasted time and online debates.

The issue is not getting better, but the COVID-19 fraud probably had the unintended effect of waking up more people

than ever before to the actual science of vaccination.

Additionally, only one of the effects of the new mRNA injections was to create a large group who were against these particular vaccines while simultaneously maintaining a belief in most other vaccines.

Let's have a look at why this "novel technology" is simply another gambit to propagate infectious disease mythology and bamboozle the public, all the while keeping them trapped in the medico-pharmaceutical germ theory paradigm.

On January 5, an article was published on the MIT Technology Review website titled 'What's Next for mRNA Vaccines'. There was no question mark in the title, so perhaps it was intended as a statement, suggesting to the world what kind of "medicine" is in the pipeline.

The article began as follows: 'Cast your mind back to 2020 if you can bear it. As the year progressed, so did the impact of COVID-19. We were warned that wearing face coverings, disinfecting everything we touched, and keeping away from other people were some of the only ways we could protect ourselves from the potentially fatal disease.'

Even for people who believe in the existence of viruses, this is a preposterous depiction of what happened in 2020. In fact, nothing happened in 2020 apart from a fraudulent narrative involving an alleged novel coronavirus that at various times has been said to either come from a wet market, a bat cave or, drum roll please, a laboratory.

In a way, COVID-19 did come from a lab, but only in the form of in silico, dry lab simulations that were used to make up the existence of SARS-CoV-2.

Similarly, the laboratory tests, such as the PCR and rapid antigen tests that were deployed, did not require the existence of a virus to be positive. They only required

circular reasoning, based on the in silico models, with the sequences and proteins falsely claimed to be “viral”.

The MIT article claims there was a ‘potentially fatal disease’, at which point we would ask, what disease?

Even on their own terms, COVID-19 is simply confirmed on the basis of molecular detection assays that have no established diagnostic validity.

COVID-19 is not a disease. It is a global fraud sustained by a medical system that lost its way a long time ago.

As my **Virus Mania** [*Virus Mania: Corona/COVID-19, Measles, Swine Flu, Cervical Cancer, Avian Flu, SARS, BSE, Hepatitis C, AIDS, Polio, Spanish Flu. How the Medical ... Making Billion-Dollar Profits At Our Expense* by Torsten Engelbrecht, Claus Köhnlein, Samantha Bailey, Stefano Scoglio] coauthor Claus Köhnlein explained in 2020, it is a PCR pandemic. There was no new disease, only new tests and plenty of gullible people.

In any case, this MIT story sets the scene with the same picture-painting to make people believe there are infectious disease epidemics when in reality they don’t exist.

And of course, the establishment always has one end point in mind with the narrative – and that’s vaccines.

So the article continues by stating that: “Thankfully, a more effective form of protection was in the works. Scientists were developing all-new vaccines at rapid speed... By the end of the year, the US. Food and Drug Administration issued emergency-use authorization for these vaccines, and vaccination efforts took off.

“As things stand today, over 670 million doses of the vaccines have been delivered to people in the US.”

This has been the typical vaccine playbook for over a century. Alleged that people are getting sick because of microbes,

whether they be real, such as bacteria or imagined, such as viruses, and then claim that vaccines are the best solution. Cover up the fact that contagion has never been demonstrated in a scientific study, and then, like this MIT article, imply that the success of a vaccine is based on how many of them are dished out.

In this regard. **Dissolving Illusions** [*Dissolving Illusions: Disease, Vaccines, and The Forgotten History* by Roman Bystryanyk, Suzanne Humphries MD] is one of the best books dealing with this mythology.

Suzanne Humphries and Roman Bystryanyk deliver a fatal blow to the theory that vaccines had anything to do with improving health outcomes last century. In particular, many of the charts they have put together are rather embarrassing. For anyone claiming that vaccines were the key to defeating diseases.

It doesn't matter if you believe in pathogens or not, because as it stands, there is no scientific evidence that vaccines are useful to anyone apart from those that benefit from selling them.

However, the medical industry is a dangerous cult when it comes to vaccines. Only a tiny minority of doctors have the courage to point out the fraud, because doing so typically results in suspension or at least limited work opportunities. Most doctors prefer to keep their head in the sand and not question their overlords, especially if their incomes could be affected in any way.

As Aneurin Bevan explained in 1948, he persuaded British doctors to accept the National Health Service, not by any merits, but by stuffing their mouths with gold, and saying that many doctors seem to genuinely believe that vaccines are useful, although almost universally they have done none of their own research and just follow protocols.

They may come across something like the CDC's 'Ten Great Public Health Achievements – United States, 1900 to 1999', see that vaccination is at the top of the list, and conclude it must be good.

However, we have dedicated a huge amount of time to following the links on the CDC's website, and none of them lead to any scientific evidence that vaccines are beneficial to the recipients.

Similarly, our **Virus Mania** team has contacted many of the medical institutions around the world requesting they provide any papers that follow the scientific method and demonstrate overall health benefits of vaccinations.

To date, none have provided any.

That's why the World Economic Forum, one of the biggest gaslighting shows currently running, reports that vaccination is one of the world's most successful health interventions, saving as many as 3 million lives every year. The WEF is concerned about vaccine hesitancy and parroted the WHO claim that the reasons people choose not to vaccinate are complex.

We can stop them right there because there's no point going further. The reason is actually simple. Many people can see that the products are dangerous and ineffective, and like my family, don't accept any of them. The decision is based on reviewing the scientific literature as well as our own experience. None of us get these diseases despite not taking the vaccines.

Incredibly, the vaccine scam is building momentum, and in the last few years the number of them administered to the world has been enormous. And there are no signs of the jabs easing up, with mRNA vaccines being touted as solutions for all kinds of problems.

As the MIT article stated, while the first approved mRNA

vaccines are for COVID-19, similar vaccines are now being explored for a whole host of other diseases. Malaria, HIV, tuberculosis and Zika are just some of the potential targets. mRNA vaccines might also be used in cancer treatments tailored to individual people.

The suggested wider use of vaccines in these conditions is not new, of course. In my video, [The Future of Vaccines](#), I mentioned the 2007 PricewaterhouseCoopers report 'Pharma 2020: The vision – Which path will you take?*' In this publication, they listed the potential development of vaccines for cocaine addiction, diabetes, hypertension, Alzheimer's disease, psoriasis, food allergies, rheumatoid arthritis and nicotine withdrawal.

What has changed since then is the focus on not just vaccines, but mRNA vaccines. Before we move on to these products, PwC had warned Big Pharma that: "The shortage of good medicines in the pipeline underlies many of the other challenges Pharma faces, including its increasing expenditure on sales and marketing, deteriorating financial performance and damaged reputation."

In the last few years, Big Pharma worked out that you don't need good medicines in the pipeline. They simply arranged for governments to do the marketing and purchasing for them, all at the expense of the taxpayers.

The WEF, has also cheered on the highway robbery, stating on their website in 2020 that: "More than 140 world leaders have called for a COVID-19 vaccine to be made available free to everyone"" Anyone that has read Henry Hazlitt's '**Economics in One Lesson**' knows that there is no such thing as a free product or service. Someone always has to cover the cost.

In the COVID era, there was a vast transfer of wealth. And all of us have had to pay in one way or another, with some people who accepted the injection paying with their lives as well.

The pharmaceutical companies are now all chomping at the bit to sell phenomenal quantities of vaccines to governments, either through these false pandemics or through their most-prized cash cow – getting a product onto childhood vaccination schedules.

The problem Big Pharma has with “regular vaccines” is that, for their liking, they take too long to develop. On that note, the Wellcome Trust had a graphic titled ‘The five stages of vaccine development’, which reported that: “A vaccine usually takes more than 10 years to develop and costs up to \$500 million”. Interestingly, the page was removed from their website at some point in late 2020, just before a certain product was released onto the world’s population. And this is where mRNA vaccines come into play.

COVID-19 was used as an excuse to rush into distribution the “novel technology”. No more waiting ten years to get the products injected into people.

Part of the COVID scam has been to make people think that pharmaceuticals can be tested in a matter of months. It was fascinating in early 2020 to see the mantra ‘safe and effective’ being parroted by much of the medical community and the wider public.

Leaving aside the nonexistence of a virus and a new disease, how could there possibly be any long-term safety data? There wasn’t, of course. And pharmacovigilance was completely thrown out the door.

Once upon a time, I was a clinical trials physician, and I can assure you that no products were ever released in a matter of months. In fact, most spent years in development and never made it to the wider public, often because there were too many adverse reactions.

In ‘**The COVID-19 Fraud and War on Humanity**’ Dr. John Bevan-Smith and my husband Mark wrote, at the start of the essay,

that the plan to inject the masses with so-called mRNA technology was already in the pipeline prior to the declaration of the alleged pandemic.

All it took was a narrative featuring an imaginary coronavirus.

[Quote from 'The COVID-19 Fraud & War on Humanity']

"The world was being prepared for a 'pandemic' and on December 4, 2019, Dr Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases stated that his agency was 'conducting and supporting research to develop state-of-the-art vaccine platform technologies that could be used to develop universal influenza vaccines as well as to improve the speed and agility of the influenza vaccine manufacturing process. These platform technologies include DNA, messenger RNA (mRNA), virus-like particles, vector-based, and self-assembling nanoparticle vaccines.'"

Somewhat incredibly, the public have mostly gone along with the swindle and have allowed themselves to be injected as many times as they are told, even if it is making them sicker.

One would suspect that a major goal for the COVID Fear campaign was to normalize this complicit and illogical behavior while creating the infrastructure to repeat the process in the future.

Fellow COVID skeptic, Denis Rancourt, also commented on this very aspect in a recent interview:

"This is about putting into place a military system of injection that is globalized. That is, whenever they want, they can inject you with whatever they want under the pretext of health. That's what this about. In my view, it's that kind of a weapon that they've put into place. They now have the possibility, they've convinced you, that it's a good idea to

be injected whenever they like with whatever they say. And they've put into place all the procedures and all the mechanisms to do that. And they've bought out all the right people. And they can go into an entire continent and virtually inject everybody."

The establishment became so comfortable with their "success" that they openly flaunted the mass compliance behavior where people had previously been much more skeptical.

Who could forget in November 2021, when president of Bayer's Pharmaceuticals Division, Stefan Oelrich, admitted at the World Health Summit that COVID-19 had made all this possible?

[quote from Stefan Oelrich's speech at World Health Summit]

"Ultimately, the mRNA vaccines are an example for that cell and gene therapy. I always like to say, if we had surveyed two years ago in the public, 'Would you be willing to take gene or cell therapy and inject it into your body?' we would have probably had a 95% refusal rate.

"I think this pandemic has also opened many people's eyes to innovation in a way that was maybe not possible before."

And how does the MIT article finish?

Well, apparently: "In 2023, we can expect an updated COVID-19 vaccine. And researchers are hopeful we'll see more mRNA vaccines enter clinics in the near future. 'I really hope that in the next couple of years, we will have other approved mRNA vaccines against infectious disease,' says Norbert Pardi.

'He is planning ahead for the next global disease outbreak, which may well involve a flu virus. We don't know when the next pandemic will hit, but we have to be ready for it,' he says. 'It's crystal clear that if you start vaccine development in the middle of a pandemic, it's already too late.'"

This is why we and our colleagues focus on exposing the fallacy of contagion in so-called infectious diseases. As all of us have explained, these are illusions propagated by the medico-pharmaceutical industry, illusions that are now used to control the population, and engineered to transfer vast quantities of wealth from the masses to crony corporations.

The only pandemics in the world are things like obesity and anxiety due to lack of purpose and exposure to fear narratives.

As Tom Cowan said, perhaps the biggest pandemic is an unprecedented pandemic of not thinking.

As a group, we do not spend a lot of time analyzing what the mRNA shots do in the body, because it is largely speculative.

My **Virus Mania** co-author Stefano Scoglio has explained that the literature surrounding the shots is full of assumptions. And only one thing is clear. They are toxic bombs that, once injected into a human, can potentially cause a variety of inflammatory responses and even death.

It is clear that vaccines are going to be used as a mechanism to control the population, maintain a fear narrative, and continue to enrich a tiny minority at the expense of the many.

However, as these filthy products are exposed for what they really are, expect an all out-propaganda campaign as they desperately try to claim that those not accepting vaccines are dangerous extremists.

[quote from Dr. Peter Hotez]

“We have to recognize that anti-vaccine activism, which I actually call anti-science aggression, has now become a major killing force globally. During the COVID pandemic in the United States, 200,000 Americans needlessly lost their lives because they refused a COVID vaccine, even after vaccines

became widely available. And now the anti-vaccine activism is expanding across the world, even into low and middle income countries. It's a killing force. Anti-science now kills more people than things like gun violence, global terrorism, nuclear proliferation or cyberattacks. And now it's become a political movement. In the US it's linked to far extremism on the far right. Same in Germany. So this is a new face of anti-science aggression. And so we need political solutions to address this."

MRNA vaccines are just the latest chapter in this psychological war and I hope you don't lose sight of the fraud taking place upstream. That is, the misplaced belief in germ theory.

"Is it any wonder that the public is getting a little suspicious of us and our vaunted 'discoveries'? The wonder to me is that there are still seventy millions of them willing to submit to vaccination and serum treatment.

"How much good did we do these poor fellows? Ask Edward Jenner! He knows now, if so be that we know after death, and am willing to believe that he would gladly spend a part of his eternity in purgatory if he could undo the wrong he did the world by vaccination."

~ **'Who are the Quacks?'** by William Howard Hay, 1940

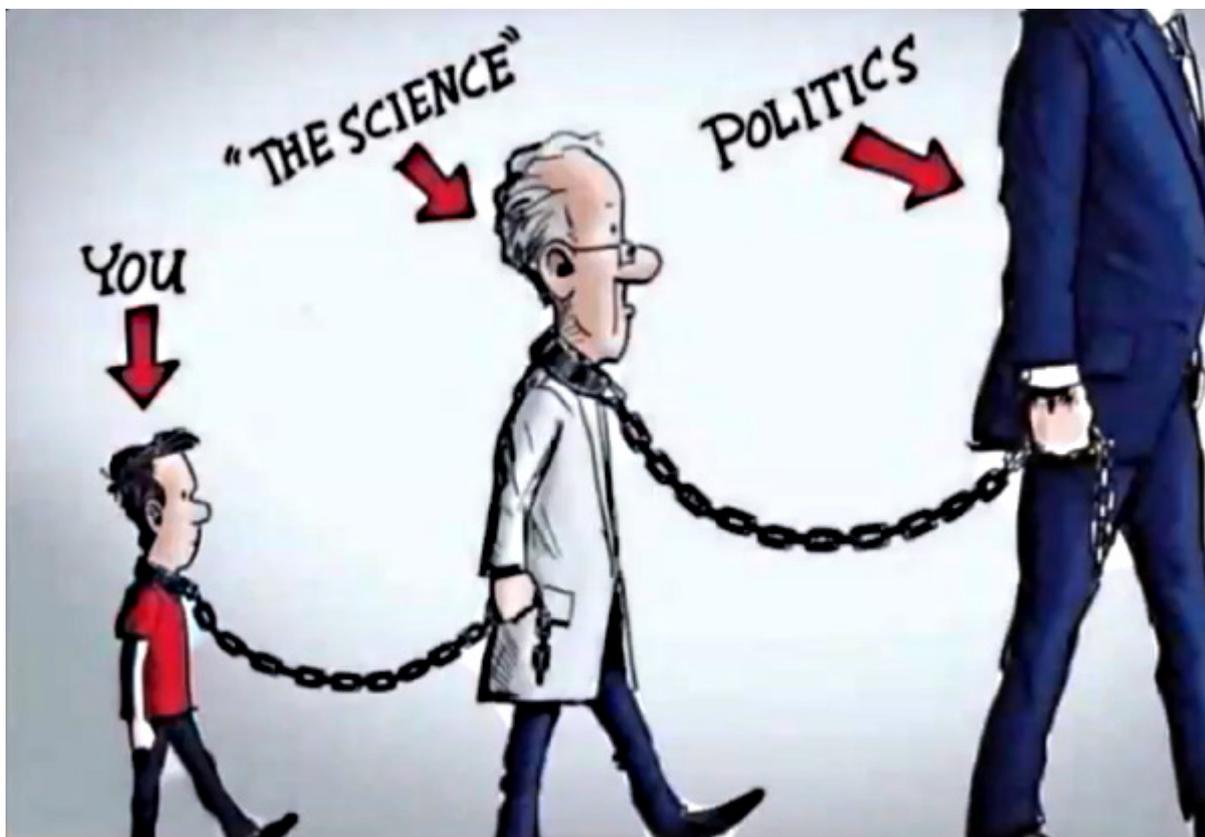
Cover image based on creative commons work of: [Dimhou](#)

See related:

[*The Covid-19 Fraud & War on Humanity*](#)

Dr. Tom Cowan With Drs. Mark & Samantha Bailey: In Response to Kevin McKernan's Statements to Medical Doctors for Covid Ethics International Group

[Dr. Tom Cowan With Drs. Mark & Samantha Bailey: In Response to Kevin McKernan's Statements to Medical Doctors for Covid Ethics International Group](#)



[Baileys & Cowan Respond to Kevin McKernan](#)

by [Drs. Sam & Mark Bailey](#) with [Dr. Tom Cowan](#)

December 8, 2022

Recently, the CSO of Medicinal Genomics, Kevin McKernan spoke to the Medical Doctors for COVID Ethics International group. He was challenged by journalist, Eric Coppolino, about the lack of evidence for SARS-CoV-2 and pathogenic viruses. McKernan made various claims that we believed needed to be addressed.

Dr. Tom Cowan and Dr. Mark Bailey join me to demystify the virological and biotechnological nonsense.

References:

1. Kevin McKernan [Bio](#)
2. Medical Doctors For COVID Ethics International Full Video Interview: [Kevin McKernan](#)
3. Medical Doctors For COVID Ethics International Video Interview: [Dr. Mark Bailey](#)
4. Medical Doctors For COVID Ethics International Video Interview: [Dr. Kevin Corbett](#)
5. [Airborne-transmission-of-SARS-CoV-2: The World Should Face The Reality](#)
6. Baric, R et al. [SARS-CoV-2 Reverse Genetics Reveals a Variable Infection Gradient in the Respiratory Tract](#)
7. Consensus Statement: [The species Severe acute respiratory syndromerelated coronavirus- classifying 2019-nCoV and naming it SARS-CoV-2](#)
8. Follow Dr. Tom Cowan [here](#)

[Connect with Drs. Samantha and Mark Bailey](#)

[Connect with Dr. Tom Cowan](#)

Referenced in the video:

- Mark Bailey's essay "[A Farewell to Virology](#)".
 - [Virus Mania](#): Corona/COVID-19, Measles, Swine Flu, Cervical Cancer, Avian Flu, SARS, BSE, Hepatitis C, AIDS, Polio, Spanish Flu. How the Medical Industry Continually Invents Epidemics, Making Billion-Dollar Profits At Our Expense by Torsten Engelbrecht, Claus Köhnlein, Samantha Bailey, Stefano Scoglio
-

Excerpts from video transcript (prepared by Truth Comes to Light):

Introduction by Sam Bailey:

In this video. Mark and I are joined by Dr. Tom Cowan to analyze the claims about "viruses" made by Kevin McKernan. Kevin is the CSO and founder of Medicinal Genomics and is a specialist in the areas of genetic sequencing and PCR technology.

He made the claims in a recent talk he gave to the Doctors for COVID Ethics International Organization.

This is the group headed by Dr. Stephen Frost and Charles Kovess, and I'd like to give credit to them for allowing all sides to the arguments to be presented through this forum. In fact, Mark spoke on their platform about the virus existence issue in October, as did Kevin Corbett a few weeks earlier.

Kevin McKernan has been promoted by Steve Kirsch as one of his proof of virus knights. So let's find out if he is

riding a horse or an imaginary unicorn.

The no-virus group has previously dismantled the claims of Sabine Hazan and Dr. Sin Lee, Kirsch's other virus champions.

Kirsch has admitted that he doesn't know the intricacies of virology and relies on "expert opinions" about where the viruses have been shown to exist. That's not a wise move in my experience, because if you don't understand what the so-called expert claims to understand, you are still in the dark.

Those promoting the virus narrative may want to reconsider where their plotlines are coming from.

Tom Cowan:

So the problem with all of this is, in a sense, it's a philosophical problem. A sequence is a part of a whole, right? There's this whole particle, which is a replication competent DNA or RNA encased in a protein which replicates in a cell and that causes lysis of the cell or cytopathic effect and therefore causes disease.

So they never found that whole, right?

They never referenced they find the whole. In fact, this guy actually says you cannot find that whole particle. So we're going to skip that and we're just going to take a piece of it and we're going to say that represents this entity called a virus.

But as I said, you can't say a piece of something belongs to a whole unless you had the whole first. You can't say a paw is part of a cat unless you've had a cat first. They don't have the cat first. So they say this sequence matches up to the sequence that has been published before that says it's a coronavirus.

Well, where did that one come from?

That one came from the sequence that was published before that was said to be a coronavirus.

So where did that one come from?

That came from the sequence before. **And that guy made it up.**

Mark Bailey:

And once again, we've followed the trails back. So for coronavirus, specifically "coronavirus", we followed the trail back to the 1980s when they claimed to have sequenced the very first "coronavirus genome".

And I looked at all of those experiments, which were done with chicken embryos, and at no point did they demonstrate that they had anything that fulfilled the description of a virus.

They just started sequencing what they found in these experiments and then said, 'well, we think there's a virus in there'.

One of the experiments was fraudulent and said that they had purified the sample of variants and there was absolutely no evidence.

But unfortunately, since the 1980s, these genomes have just been put onto databases, And now we have people like Kevin McKernan saying it's valid because we can check the sequences against what we find on a database.

And if we find them again, that means that we're finding "viruses", when absolutely no evidence that that's what they've got.

Tom Cowan:

In some ways, after this two and a half, three year odyssey we've all been on, I almost wish we had never got into the thing about exosomes because the reality is, what they claim to be the proof of the existence of a virus is they take unpurified samples and inoculate those onto mostly vero cells, which are monkey kidney cells. And if it breaks down, they claim that is the proof of the virus.

Now, I was going to show you, and I think Sam will put up there's the study of Enders, there's three more studies from the 50s showing that vero cells break down without having any virus in the sample, any sample that could possibly have a virus.

So that's a total of four from the 50s. Then Stefan [Lanka] did a study showing the same thing. You don't need any sample with the virus to have the cells break down.

*...Now, what, what happens when the cells break down, whether in a culture or in us, is it makes basically breakdown products, which is like garbage. And unfortunately, we started calling those exosomes as if they had some special importance, like messengers around the body or something. **But the fact of the matter is, as far as I can see, while there may be something called an exosome, it's just garbage.** The cells break down, they make little things that you could see on an electron microscope, which are just typical normal cellular breakdown products.*

So there are no exosomes circulating around the world. That's nonsense. There are no viruses.

Now, the other thing that he doesn't seem to understand, which is mind boggling, is the reason you get the same sequence all over the world is because you put this library of RNA into a computer and you give it a template which says 'make SARS-CoV-2'. So, by God, it does!

It's like 'make a Volkswagen all over the world'. So they

have Volkswagen plants all over the world. And oh, my God, the Volkswagens are traveling all over the world. No, they're not. You're telling each factory to make a Volkswagen. That's the template. Each virology sequencing lab, it puts in the template to take these letters and make it into SARS-CoV-2 sequence. So it does. That's not traveling all over the world. That's just making Volkswagens at different factories all over the world. Nobody's traveling anywhere.

Mark Bailey:

Well, exactly, Tom with his claim that something is traveling around the world. I mean, we were trying to point this out in 2020, and [Sam's co-author Claus Köhnlein](#) was one of the first in the world to point this out. **He said there's nothing passing around apart from a PCR protocol. And he pointed out, he said, wherever you take the PCR protocol, you'll find this "COVID-19" or the "virus".** It's not something that's necessarily passing around. It's just – it's literally a PCR pandemic. And if you set the protocols to find a certain sequence, you end up finding them.

Now, the other thing is that we're not always saying that these sequences don't change over time. So they might say, well, we got some samples from ten years ago and we couldn't find these sequences. But that's not how nature works. We know that genetic sequences have variations over time. I mean, our own genomes are not fixed, as we know if we take it from different parts of our bodies at different points in time, we'll find different sequences. But the problem is, with this form of indirect evidence, they're trying to say that if we find these sequences and at some stage someone declared that they're viral, and if we find them again, that's our evidence that we're finding a virus that's spreading around.

The other aspect that Kevin introduced there was the cycle threshold. Now, what he's saying there is, he's saying that if the cycle threshold is set too high, then it's invalid. But if the cycle thresholds set at an appropriate low level, then it is valid. This is problematic because it comes back to our first point that these particular sequences that the PCR is amplifying have not been shown to be viral. So the cycle threshold is not an issue. I mean, that's a technical issue and it relates to good laboratory practice. And we know that once you get to thresholds at about 35, it's basically an artifact result. And we know they're doing that a lot. But I think he misses our point. We're not saying it's a cycle threshold issue, we're saying it's a provenance issue and it's a proof of these sequences actually belonging to a virus.

And it is difficult because for a lot of lay people, when they get presented with epidemiology or a news story and they get a headline that this thing is spreading around the world, they don't understand that simply all that spreading is a PCR protocol.

And I think the other issue is that someone like Kevin would say, well, everyone in the household, we detected the same sequence. And again, that's evidence of nothing in particular.

I mean, it would be like saying that you isolated strep pneumonia from someone in the family and then a week later you've found that you could isolate it from every member of the family. But it doesn't mean anything. That's just particles. In this case, that would be bacteria, something that we can actually see passing around between people, but it's not a pathogenic process.

So again, to claim that we can use the protection of sequences to claim that there's a virus spreading, it's simply that's a logical fallacy, pure and simple.

See related:

[Getting to the Truth About “Viruses”: Drs. Sam & Mark Bailey, Andrew Kaufman & Tom Cowan Respond to Del Bigtree’s Statements in a Recent Interview With The Conscious Resistance](#)

[‘The End of Germ Theory’ Documentary: An Easy-to-Understand, Step-by-Step Analysis of the History of Germ & Virus Theory, the Erroneous “Science” Behind Vaccination & a Close Look at What Really Makes Us Sick – The Big Pharma Cartel & the Deep Deception of Viral Pandemics](#)

[Jon Rappoport With Dr. Sam Bailey: The Virus Cover Story](#)

[Jim West: The Toxicology Taboo](#)

[Bioweapon BS – The Lab Leak Narrative & Virology’s Ongoing, Cruel, Pointless Torture & Massacre of Animals](#)

[Mary Holland of Children’s Health Defense Leads Discussion of the Documentary “The Viral Delusion: The Tragic Pseudoscience of SARS-CoV2 & The Madness of Modern Virology”](#)

[The Path Paved by Dr. Lanka: Exposing the Lies of Virology](#)

[Dr. Tom Cowan: Lab Created Viruses? Gain of Function Research? Bio Labs? – Smoking Gun or Bad Science?](#)

[The Viral Delusion \(2022\) Docu-Series: The Tragic Pseudoscience of SARS-CoV2 & the Madness of Modern Virology](#)

[Why Nobody Can Find a Virus](#)

[Dr. Tom Cowan & Dr. Andrew Kaufman: A Challenging Response to Dr. Mercola's Article "Yes, SARS-CoV-2 Is a Real Virus"](#)

[The Emperor Has No Corona](#)

“They’re Doing It Again!”: Dr. Sam Bailey on the Cruise Ship “Covid Outbreak” Narrative

[“They’re Doing It Again!”: Dr. Sam Bailey on the Cruise Ship “Covid Outbreak” Narrative](#)

[They’re Doing It Again!](#)

by [Dr. Samantha Bailey](#)

November 19, 2022

References

1. "[Cruise ship Majestic Princess docks in Sydney with 800 Covid cases on board](#)", *The Guardian*, 12 Nov 2022.
2. "[COVID-19 pandemic on Diamond Princess](#)", Wikipedia.
3. "[COVID-19: Behind The PCR Curtain](#)", Dr Sam Bailey.
4. "[A Farewell to Virology \(Expert Edition\)](#)", Dr Mark Bailey.
5. "[The COVID-19 Fraud & War on Humanity](#)", Dr Mark Bailey & Dr John Bevan-Smith.
6. "[Two coronavirus-infected passengers die](#)", NHK (archived).
7. "[The Lancet Commission on lessons for the future from the COVID-19 pandemic](#)"
8. "[Virologie Nights](#)", Dr Sam Bailey.
9. "[Gain of Fiction – Webinar from 11/11/22](#)", Dr Tom Cowan.

[Connect with Drs. Samantha and Mark Bailey](#)

Virologie Nights: “The Virus Fraud Is One of the Greatest Gaslighting Activities Ever Perpetuated on the Planet.”

[Virologie Nights: “The Virus Fraud Is One of the Greatest Gaslighting Activities Ever Perpetuated on the Planet.”](#)

[Virologie Nights](#)

by [Dr. Sam Bailey](#)

November 5, 2022

The “Gain of Function” narrative is reaching all new heights. Boston University claimed they engineered a “virus” with an 80% lethality rate. But what actually killed these poor mice?

Let’s have a look at some of the “fear-porn” promoters of these stories and why they are leading people astray with pseudoscience.

[Video available at Dr. Sam Bailey [Odysee](#) channel.]

1. [SpaceBusters](#) Bitchute channel.
2. [“‘Viruses’ – Baileys, Cowan & Kaufman Respond To Del Bigtree”](#) – 4 Sep 2022.
3. The “Settling The Virus Debate” [Statement](#).
4. Paul Thomas & James Lyons-Weiler, [“Relative Incidence of Office Visits and Cumulative Rates of Billed Diagnoses Along the Axis of Vaccination”](#) – Nov 2020.
5. Roman Bystryanyk & Suzanne Humphries, *Dissolving Illusions*, [charts](#).
6. Dr Sam Bailey, [“Gain of Function Gaslighting”](#), 30 Jun 2021.
7. Dr Sam Bailey, [“Gain of Function Garbage”](#), 18 Jan 2022.
8. Dr Sam Bailey, [“Bioweapons BS”](#), 1 Oct 2022.
9. Mark Bailey, [“A Farewell to Virology”](#), 15 Sep 2022.
10. [“Role of spike in the pathogenic and antigenic behaviour of SARS-CoV-2 B.A.-0ne Omicron”](#)
11. Mike Stone, [“It’s Gain of Fiction Story Time with RFK Jr. and Friends!”](#) – 24 Oct 2022.
12. K18-hACE2 Mice: http://www.arc.wa.gov.au/?page_id=5637

See more articles and videos from the Baileys on [Germ Theory](#)

[Connect with Drs. Samantha & Mark Bailey](#)

See related:

[A Farewell to Virology \(Expert Edition\)](#)

cover image credit: [pixabay](#)

Jim West: The Toxicology Taboo

[Jim West: The Toxicology Taboo](#)

by [Dr. Sam Bailey](#)

October 29, 2022

[Jim West](#) is a legendary researcher and [author](#), although he tends to keep a low profile. You may have seen his work, but not known where it was from. He has uncovered a massive amount of evidence to support his hypothesis that persistent pesticides caused [The Great Polio Epidemic](#), post-WWII.

Much of his research has led to the same conclusion that [viruses are being used as a cover story](#) for the real causes of disease. Jim ties together science, psychology and spirituality and I could listen to him all day.

With no political or career conflicts of interest, he is able to critique the professional medical establishment in areas of scientific truth that most people are too afraid to go near.

Here is what he said about:

- His journey of discovery and greatest influences
- The virology scam
- The Polio/DDT charts
- The corruption of the medical establishment
- The *health freedom movement* – virus promoters vs no virus group
- History of germ theory and the need to protect industry (going back to the Bible)
- Political vs Scientific Truth
- What individuals can do to combat medical tyranny

and much more!

References:

1. [DDT/Polio: Virology vs Toxicology](#) – Jim West's Book
2. Jim's [Website](#)
3. 6% Global Income Big Tech: [How the EU is Forcing Twitter to Censor \(and Musk Can't Stop It\)](#)
4. Jim's [Blog](#)

[Connect with Dr. Sam Bailey](#)

cover image credit: [CDD20](#)

**German Engineer Marvin
Haberland Challenges the**

Existence of Covid Virus in German Court

[German Engineer Marvin Haberland Challenges the Existence of Covid Virus in German Court](#)

[Marvin vs Virology: COVID Taken to Court](#)

by [Dr. Sam Bailey](#)

October 11, 2022

Many of us know that the virologists have not been following the [scientific method](#) and have no evidence that viruses exist. One of their biggest problems is that they [don't perform valid controls](#) in their experiments.

German engineer Marvin Haberland has worked out a way to get a public admission that SARS-CoV-2 has not been shown to exist. When Marvin broke "corona" legislation, the German authorities unwittingly took the bait.

If they want to convict him, they will have to justify the fraudulent nature of virology in a public court.

The virologists better come up with some decent excuses fast...

[Video available at Dr. Sam Bailey [Odysee](#) channel.]

References:

1. Dr. Mark Bailey – [A Farewell To Virology \(Expert Edition\)](#)
2. Dr. Sam Bailey – [Secrets of Virology "Control" Experiments](#)
3. Dr. Sam Bailey – [The Truth About Virus Isolation](#)

4. Spanish Flu Video – [Secrets of Influenza](#)
5. Corona Fakten [Telegram Channel](#)
6. German Legislation: [Law for the Prevention and Control of Infectious Diseases in Humans \(Infection Protection Act – IfSG\) Paragraph 1](#)
7. DFG Funding, [Good Research Practice](#)
8. Wikipedia – [German Research Foundation](#)
9. Measles Court Case [Protocol Findings](#)
10. [Virus Mania](#) – 3rd Edition
11. [The Peter Doherty Institute](#)
12. [Christine Massey FOIA](#)
13. [COVID 19 Fraud & War On Humanity – Part 1](#) video
14. [The “Settling The Virus Debate” Statement](#)

[Connect with Drs. Samantha and Mark Bailey](#)

Bioweapon BS – The Lab Leak Narrative & Virology’s Ongoing, Cruel, Pointless Torture & Massacre of Animals

[Bioweapon BS – The Lab Leak Narrative & Virology’s Ongoing, Cruel, Pointless Torture & Massacre of Animals](#)

“This cannot be called a contagious entity. It had to be pumped directly into their lungs and was never demonstrated to pass between animals. Furthermore, there was no control

experiment where comparable monkeys were knocked out and assaulted by a similar nebulized biological brew, forced into their lungs for 10 minutes, as well as being bled multiple times, being surgically implanted with recording devices, and being confined in isolation chambers.

In other words, it wasn't a scientific experiment. It was another of virology's pointless animal massacres.

Those who promote the bioweapon and lab leak narrative are falling for the headlines and parroting the claims of the virologists on face value. They might also want to pause and think why these stories are promoted by the mainstream media."

###

"Additionally, as I mentioned earlier, this bioweapon and biosecurity scam is a multi-billion dollar business. So, knowingly or not, those involved will act in a way to keep the gravy train going."

###

"The bioweapon narrative relies on one thing. And that is getting the public to keep believing in both germ theory and the existence of viruses.

Sure, there have been many attempts to make bioweapons. But there is no evidence of any contagious product that can pass from human to human.

All they have are toxic products that can be injected into people or otherwise used to poison them through mechanisms that are not 'infections'."

~ Dr. Sam Bailey

[Bioweapon BS](#)

by [Drs. Samantha & Mark Bailey](#)

October 1, 2022

Many people can see that there are problems with the “virus” model and the concept of [contagion](#) in general. However, the notion of “bioweapons” instills a sense of fear in the population. Along with the mainstream media, various members of the health freedom community are promoting “engineered pathogens” and “[lab leaks](#).”

In this video, we take a look at the scientific evidence at the heart of these so-called “bioweapons” claims. Watch as we dismantle the most scary “virus” of them all – **Ebola**.

References

1. “[Gain of Function Gaslighting](#)”, *Dr Sam Bailey*, 30 Jun 2021.
2. “[Gain of Function Garbage](#)”, *Dr Sam Bailey*, 18 Jan 2022.
3. “[Biohazard](#)” in *New York Times*, 20 Jun 1999.
4. “[Selling the threat of bioterrorism](#)”, *LA Times*, 1 Jul 2007.
5. “[Dr. Ken Alibek & Dr. Peter McCullough \(C19: Origins & Intentions\)](#)”, 14 Sep 2022.
6. “[The Best Decision Bill Gates Ever Made](#)”, *WSJ*, 18 Feb 2021.
7. “[Ebola: Last British man to survive deadly virus says public must be warned of danger](#)”, 25 Aug 2014.
8. “[A case of Ebola virus infection](#)”, *BMJ*, 27 Aug 1977.
9. “[Side effects of interferon-alpha therapy](#)”, *Pharm Work Sci*, Dec 2005.
10. “[Viral haemorrhagic fever in southern Sudan and northern Zaire. Preliminary studies on the aetiological agent](#)”, *Lancet*, 1977.

11. [“The Ebola “Virus” Part 1”](#), *ViroLIEgy*, 26 Sep 2022.
12. [“Experimental Respiratory Infection of Marmosets \(Callithrix jacchus\) With Ebola Virus Kikwit”](#), *The Journal of Infectious Diseases*, 1 Sept 2015.
13. [“The Fauci/COVID-19 Dossier”](#), by Dr David Martin, 2021.
14. [“A Farewell To Virology \(Expert Edition\)”](#), Dr Mark Bailey, 15 Sep 2022.
15. [“21st Century Wire – Patrick Henningsen with Dr. Mark Bailey”](#), 25 Sep 2022.
16. [“Conversations With Dr. Cowan & Friends | EP 53: Dr. Mark Bailey”](#), 22 Sep 2022.
17. [“Anthrax, Arsenic and Old Lace”](#), Sally Fallon Morell, 19 Oct 2020.

[Connect with Drs. Mark & Sam Bailey](#)

cover image credit: [Syaibatulhamdi](#)

Dr. Tom Cowan With Dr. Mark Bailey: “SARS-CoV-2 Virus Could Never Have Been Leaked From a Lab Because No Such

Particle Has Been Proven to Exist. Ever.”

[Dr. Tom Cowan With Dr. Mark Bailey: “SARS-CoV-2 Virus Could Never Have Been Leaked From a Lab Because No Such Particle Has Been Proven to Exist. Ever.”](#)

by [Dr. Tom Cowan](#)

September 22, 2022

Dear friends,

As many of you know, economist Jeffrey Sachs, the head of the Lancet Covid-19 Commission, dropped a bombshell recently when he announced his support for the theory that the origin of SARS-CoV-2 was most likely a leak from a virology lab in Wuhan, China. His assertion follows years of speculation – within the health-freedom community, the halls of Congress and in the popular and scientific press – that such an event took place.

After making this announcement, Sachs was interviewed by Robert F. Kennedy, Jr., about the circumstances and evidence for this lab-leaked virus. Kennedy is also releasing a new book that purports to lay out the evidence for this theory, and how it proves the duplicity of government officials such as Fauci, who they allege are accomplices in unleashing this plague upon the world.

Other prominent lawyers, doctors and researchers have also publicly endorsed the lab-leak hypothesis. Del Bigtree of the Highwire podcast has even claimed that it’s settled fact that SARS-CoV-2 was created through so-called gain-of-function research, largely funded by Fauci-led government labs. This act, they say, is allegedly the smoking gun, the proof that

Covid was and is a “plandemic” organized and funded by the elites to create the conditions to enact the World Economic Forum’s The Great Reset.

While it is not my intention to denigrate the good work done by Kennedy and others in exposing the horrors of the Great Reset agenda and speaking out against restrictions on our freedoms, I strongly encourage them and anyone else to listen to today’s podcast with Dr. Mark Bailey. In doing so, they will hear that a SARS-CoV-2 virus could never have been leaked from a lab because no such particle has been proven to exist. Ever. Not only that, the alleged claim that SARS-CoV-2 is a chimeric virus made from portions of HIV mixed with previously discovered coronaviruses can’t possibly be true because, as you probably already know, neither HIV nor previous “coronaviruses” have themselves been shown to exist.

The most interesting question of all is not the science, as that is easy to demonstrate: **No natural, chimeric, lab-created or any other type of SARS-CoV-2 has been proven to exist.** The question is, why this story? The answer might have come from Sachs himself, who in a long follow-up article essentially came to the conclusion that, as a result of discovering this lab leak, whether purposeful or accidental, it is no longer possible to trust national governments or virology labs to police themselves. They have been proven to be corrupt, sloppy and untrustworthy. His solution? We must put the oversight of all virology labs and, perhaps someday, of all “science” labs under the gentle and careful guidance of the World Health Organization and related supranational bodies.

I was absolutely shocked to read this purported solution. To centralize control of scientific experimentation in the WHO, an unelected and unaccountable body that pushed the effort to vaccinate most of humanity and drove the disastrous lockdown policies worldwide, would create an even bigger monster to battle. It now feels urgent for the health-freedom community to rigorously investigate the whole story of SARS-CoV-2 in

particular and virology in general. As Mark and I point out in this podcast, the health-freedom promulgators of the lab-leak theory now have two options. First, they can demonstrate how they know that HIV, the original coronavirus and SARS-CoV-2 exist, and then show how this chimeric lab-created virus was spread throughout the world. Or, they can investigate further the scientific evidence of virology's catastrophic and obvious lies.

Their response to this request will help demonstrate whether a "unity conference" as proposed by Kennedy's Children's Health Defense is a real possibility. My sincere hope is that those in the medical-freedom community have simply misunderstood the science of virology.

All the best,
Tom

Video available at [Dr. Tom Cowan BitChute](#) channel. [Mirrored copies available at TCTL [Odysee](#), [BitChute](#) & [Brighteon](#) channels.]

Read and download at the Bailey's website (Mark & Samantha Bailey):

<https://drsambailey.com/a-farewell-to-virology-expert-edition/>

[Connect with Dr. Tom Cowan](#)

[Connect with Dr. Mark Bailey](#)

A Farewell to Virology (Expert Edition)

[A Farewell to Virology \(Expert Edition\)](#)

[Truth Comes to Light editor's note: Below you will find the abstract & the postscript for Dr. Mark Bailey's essay entitled "[A Farewell to Virology \(Expert Edition\)](#)". Use the links provided to view the entire 67-page report at Mark & Samantha Bailey's website.]

[Read & Download the Full 67-Page Essay in PDF Format](#)

[A Farewell to Virology \(Expert Edition\)](#)

by [Dr. Mark Bailey](#)

September 15, 2022

Abstract

Virology invented the virus model but has consistently failed to fulfil its own requirements. It is claimed that viruses cause disease after transmitting between hosts such as humans and yet the scientific evidence for these claims is missing. One of virology's greatest failures has been the inability to obtain any viral particles directly from the tissues of organisms said to have "viral" diseases. In order to obfuscate this state of affairs, virologists have resorted to creating their own pseudoscientific methods to replace the longstanding scientific method, as well as changing the dictionary meaning of words in order to support their anti-scientific practices. For instance, an "isolated" isolate does not require the

physical existence of the particles in order to be afforded "isolation" status.

A viral particle must fulfil defined physical and biological properties including being a replication-competent intracellular parasite capable of causing disease in a host such as a human. However, "viruses" such as SARS-CoV-2 are nothing more than phantom constructs, existing only in imaginations and computer simulations. In this paradigm, cases of invented diseases like COVID-19 are nothing more than the detection of selected genetic sequences and proteins purported to be "viral." The existence of a virus is not required in this loop of circular reasoning and thus entire "pandemics" can be built upon digital creations and falsely sustained through in vitro ("test tube") molecular reactions.

This essay contains three parts. Part One outlines some of the history of virology and the failures of the virologists to follow the scientific method. The many and far-reaching claims of the virologists can all be shown to be flawed due to: (a) the lack of direct evidence, and (b) the invalidation of indirect "evidence" due to the uncontrolled nature of the experiments. The examples provided cover all major aspects of the virological fraud including alleged isolation, cytopathic effects, genomics, antibodies, and animal pathogenicity studies.

Part Two examines the fraud used to propagate the COVID-19 "pandemic." A breakdown of the methodology relied upon by the original inventors Fan Wu et al., shows how the fictional SARS-CoV-2 was "created" through anti-scientific methods and linguistic sleights of hands. It is part of an ongoing deception where viruses are claimed to exist by templating them against previous "virus" templates. Using SARS-CoV-2 as an example, the trail of "coronavirus" genomic templates going back to the 1980s reveals that none of these genetic sequences have ever been shown to come from inside any viral particle – the phylogenetic trees are fantasies. The misapplication of

the polymerase chain reaction has propagated this aspect of virology's fraud and created the 'cases' to maintain the illusion of a pandemic. Part Three provides an analysis of how some key participants, "health" institutions, and the mainstream media maintain the virus illusion through information control and narratives that parrot virology's claims. By way of happenstance, the virological fraud now finds itself front and centre of the COVID-19 fraud. From here, however, it can be critically appraised by those outside virology and the pseudoscientific paradigm virology has built around itself can finally be dismantled and laid to rest.

The aim of this essay is to provide refutations to various claims that pathogenic viruses exist and cause disease. SARS-CoV-2 has been used as the main example but the principles apply to all alleged viruses. What follows addresses virology's often arcane literature on its own terms, which, it should be said, may make parts of this essay somewhat heavy reading. However, it is hoped that this contribution will fill a niche for the reader seeking a more technical understanding of the virus hypothesis as it seeks to expose the very foundation of purported pandemics and fraudulent medical practices. The threat of virology to humanity is increasing so it is time we bid farewell to these destructive pseudoscientific practices and free ourselves from unnecessary fears.

Postscript

No matter how long an essay covering this topic may be, there will always be more questions in the form of, "but what about...?" The desire to fit observed phenomena to the virus model is strongly programmed on many levels. It was not the intention of this essay to explain peripheral observations or the cause of various illnesses in organisms such as humans. As has been detailed, it only needs to be demonstrated that the

viral hypothesis has refuted itself on its own terms. The virologists have provided no direct evidence of pathogenic viruses and instead have resorted to indirect observations that are invalidated due to the uncontrolled nature of the experiments. Additionally, adhering to the scientific method places us under no obligation to provide an alternative explanation for these phenomena – when a hypothesis has been falsified, even once, it is done for. Tragically, the explanations to many of the “but what about...?” questions have already been answered elsewhere but the seduction of the “virus” and the juggernaut of surrounding interests have formed an artificial knowledge barrier for many people. In this light, I have endeavoured to serve the highest purpose I know and hope that my contributions will help humanity throw off the imaginary viral shackles once and for all.

Progress consists, not in the increase of truth, but in freeing it from its wrappings. The truth is obtained like gold, not by letting it grow bigger, but by washing off from it everything that isn't gold. – Leo Tolstoy

[Read & Download the Full 67-Page Essay in PDF Format](#)

[Connect with Drs Mark & Sam Bailey](#)

image credit: nicolasdebraypointcom

Getting to the Truth About

“Viruses”: Drs. Sam & Mark Bailey, Andrew Kaufman & Tom Cowan Respond to Del Bigtree’s Statements in a Recent Interview With The Conscious Resistance

[Getting to the Truth About “Viruses”: Drs. Sam & Mark Bailey, Andrew Kaufman & Tom Cowan Respond to Del Bigtree’s Statements in a Recent Interview With The Conscious Resistance](#)

“I think realistically, we’re talking about the state of the science in virology. And these are facts that we can check within their own publications. So, we’re not presenting a philosophical view about how biology works necessarily. What we’re saying is that when we go to the scientific literature, we can see that they’ve not established that there are pathogenic particles called viruses.”

~ Dr. Mark Bailey

“...The way I see it right now is – the goal, I’d say, is to stop the tyranny... And the good thing, I would say, is that whoever is the perpetrators of this... in a sense they gave us a gift. And the gift is, they made this particular tyranny – focus of it – to be about a virus. And it turns out that if you actually go into how do you know whether these so-called pathogenic viruses exist, it’s very simple...

...With viruses, there's no technical problem of finding them. We've been able to do this for over 70 years. And the fact of the matter is... you can't find them in the habitat that they say they are. And so this becomes such a scientific truth – logical, rational way of understanding the world. And it becomes clear to just about everybody that they can't prove that these viruses exist.

And since the goal is to stop the tyranny... if you show that there's no evidence that they do exist, which is very easy to do, then all of the things in the tyranny – so-called vaccines, injections, social distancing, masking, closing businesses, restriction of travel – all that makes no sense. No sense. So you don't have to fight about all those things..."

~ Dr. Tom Cowan

["Viruses" – Baileys, Cowan & Kaufman Respond to Del Bigtree](#)

by [Drs. Sam and Mark Bailey](#), with Dr. Andrew Kaufman & Dr. Tom Cowan

September 3, 2022

In a recent [interview](#), Del Bigtree suggested that the world is not ready for the "no virus" conversation.

We take a different view, which is why the ["Settling The Virus Debate" Statement](#) was launched.

Dr Sam and Mark Bailey are joined by [Dr Tom Cowan](#) and [Dr Andy Kaufman](#) to analyse Bigtree's strategy. We discuss why we believe the COVID-19 situation should be used to unravel not only the virus model, but the fraud of germ theory as well.

References:

1. Del Bigtree [Interview](#)
2. [The “Settling The Virus Debate” Statement](#)
3. [Dr Tom Cowan](#)
4. [Dr Andrew Kaufman](#)
5. Dr Sam Bailey – [Virus Debate Statement Video](#)

[Connect with Drs. Mark & Sam Bailey](#)

[Connect with Dr. Tom Cowan](#)

[Connect with Dr. Andrew Kaufman](#)

cover image credit: kalhh

The Path Paved by Dr. Lanka: Exposing the Lies of Virology

[The Path Paved by Dr. Lanka: Exposing the Lies of Virology](#)

[The Path Paved by Dr. Lanka](#)

by [Mike Stone](#), [ViroLIEgy](#)

August 16, 2022

I remember early on in 2017, when I first started unraveling the “virus” lie through the examination of HIV/AIDS, to being

introduced to the work of Dr. Stefan Lanka. If memory serves me correctly, my first encounter was through the brilliant [House of Numbers](#) documentary by Brent Leung. I was simply amazed that Dr. Lanka, an ex-virologist, was actually calling out the methods of his own profession. His testimony, along with that of Kary Mullis, the inventor of the misused and abused [PCR technique](#), carried much weight with me in those early days. Their words lent credibility to the argument that the evidence for the [existence of HIV](#) and other “viruses” was entirely absent and fraudulent.

During that time of intense research where I was desperately seeking out any and all information that I could find, I fortunately stumbled onto a few of Dr. Lanka’s articles through the [VirusMyth.com](#) website. I was engrossed in his work and absorbed much of what he had to say on the subject, especially in regards to the [lack of purification and isolation](#) of any “viruses,” the faults of the [cell culture method](#), and the problems related to [electron microscope imagery](#). As it did for many others, Dr. Lanka’s work formed much of the foundation for my understanding of the lies of virology. It is rare to gain such critical insight from someone who was involved in the industry. It is even more rare for someone in his position to set out and actually prove what he was saying correct yet that is exactly what Dr. Lanka has done numerous times.

Without Dr. Lanka’s enormous contributions to unraveling the lies of germ theory, many of us speaking out today may not have been doing so. As his work was instrumental in helping me along on my own journey towards uncovering the truth, I want to highlight what I consider Dr. Lanka’s three biggest contributions to proving the fraud of virology along with many of the papers he has written on the subject. My hope is that you will be able to come away with a greater appreciation for Dr. Lanka’s monumental work as well as a clearer understanding of the deceptive practices used by virologists.

1. The Measles Trial

Early on in my journey, I found my way to the infamous measles trial saga while researching Dr. Lanka's work. Back in 2017, it was difficult to find out much accurate information on what had really transpired. For those who are unaware, Dr. Lanka set forth a challenge in his own magazine calling upon anyone to come forward with a single paper providing the scientific evidence which proved the existence of a measles "virus." If this challenge was met, the person would receive a \$100,000 financial reward. A physician named David Bardens came forward with six papers spanning six decades which he claimed together proved the existence of the measles "virus." Dr. Lanka refused to pay as he specifically requested one publication providing the entire proof necessary. Dr. Bardens sued and while Dr. Lanka lost the initial case in the lower courts, he won on appeal in the higher courts. At the time I originally came upon this story, the internet was (and still is) full of stories claiming that Dr. Lanka lost the case. However, to anyone interested in the truth, it is obvious that those lies do not hold up under scrutiny. Presented below is a great overview of how the events actually played out:

"On November 24, 2011, Dr. Lanka announced on his website that he would offer a prize of € 100,000 to anyone who could prove the existence of the measles virus. The announcement read as follows: "The reward will be paid, if a scientific publication is presented, in which the existence of the measles virus is not only asserted, but also proven and in which, among other things, the diameter of the measles virus is determined.

In January 2012, Dr. David Bardens took Dr. Lanka up on his pledge. He offered six papers on the subject and asked Dr. Lanka to transfer the € 100,000 to his bank account.

The six publications are:

1. Enders JF, Peebles TC. Propagation in tissue

- cultures of cytopathogenic agents from patients with measles. Proc Soc Exp Biol Med. 1954 Jun;86(2):277–286.
2. Bech V, Magnus Pv. Studies on measles virus in monkey kidney tissue cultures. Acta Pathol Microbiol Scand. 1959; 42(1): 75–85
 3. Horikami SM, Moyer SA. Structure, Transcription, and Replication of Measles Virus. Curr Top Microbiol Immunol. 1995; 191: 35–50.
 4. Nakai M, Imagawa DT. Electron microscopy of measles virus replication. J Virol. 1969 Feb; 3(2): 187–97.
 5. Lund GA, Tyrell, DL, Bradley RD, Scraba DG. The molecular length of measles virus RNA and the structural organization of measles nucleocapsids. J Gen Virol. 1984 Sep;65 (Pt 9):1535–
 6. Daikoku E, Morita C, Kohno T, Sano K. Analysis of Morphology and Infectivity of Measles Virus Particles. Bulletin of the Osaka Medical College. 2007; 53(2): 107–14.

Dr. Lanka refused to pay the money since in his opinion these publications did not provide adequate evidence. Subsequently, Dr. Bardens took Dr. Lanka to court.

On March 12, 2015, the District Court Ravensburg in southern Germany ruled that the criteria of the advertisement had been fulfilled ordering Dr. Lanka to pay up. Dr. Lanka appealed the ruling.

On February 16, 2016, the Higher Regional Court of Stuttgart (OLG) re-evaluated the first ruling, judging that Dr. Bardens did not meet the criteria since he failed to provide proof for the existence of the measles virus presented in one publication, as asked by Dr. Lanka in his announcement. Therefore, Dr. Lanka does not have to pay the prize money.

On January 16, 2017, the First Civil Senate of the German Federal Court of Justice (BGH) confirmed the ruling of the OLG Stuttgart.

Critics of the judicial verdict argue that Dr. Lanka's victory is solely based on how he had formulated the offer of reward, namely to pay the € 100,000 for the presentation of a single publication of evidence (which Dr. Bardens was unable to provide). This argument, however, distracts the attention from the essential points.

According to the minutes of the court proceedings (page 7/ first paragraph), Andreas Podbielski, head of the Department of Medical Microbiology, Virology and Hygiene at the University Hospital in Rostock, who was one of the appointed experts at the trial, stated that even though the existence of the measles virus could be concluded from the summary of the six papers submitted by Dr. Bardens, none of the authors had conducted any controlled experiments in accordance with internationally defined rules and principles of good scientific practice (see also the method of "indirect evidence"). Professor Podbielski considers this lack of control experiments explicitly as a "methodological weakness" of these publications, which are after all the relevant studies on the subject (there are no other publications trying to attempt to prove the existence of the "measles virus"). Thus, at this point, a publication about the existence of the measles virus that stands the test of good science has yet to be delivered.

Furthermore, at the trial it was noted that contrary to its legal remit as per § 4 Infection Protection Act (IfSG) the Robert Koch Institute (RKI), the highest German authority in the field of infectious diseases, has failed to perform tests for the alleged measles virus and to publish these. The RKI claims that it made internal studies on the measles virus, however, refuses to hand over or publish the results."

[Click to access Lanka_Bardens_Trial_E.pdf](#)

For an even more in-depth analysis of what really occurred during the trial, I always recommend this article by Feli Popescu, who was actually present during the proceedings:

<https://feli-popescu.blogspot.com/2018/09/still-no-proof-for-measles-virus.html?m=1>

When I think of Dr. Lanka's work, the measles trial stands out as the most significant moment and the most pivotal accomplishment. We had an epic head-to-head clash between the medical establishment and an ex-virologist taking place in a court of law over the legitimacy of the evidence for the measles "virus." It was determined through this trial that the foundational paper claiming the existence and isolation of the measles "virus," [the 1954 paper by John Franklin Enders](#), was unworthy by itself for proving the existence of the "virus." As all other papers and virology itself owe their evidence to the cell culture methods developed by Enders in that paper, it is an astonishingly damning admission that the evidence presented by virology is invalid.

2. The 7 Steps Proving "Viruses" Don't Exist

More recently, Dr. Lanka put together what he felt were the main points that bring the house of cards known as virology tumbling down. These 7 steps were formulated over many years of painstaking research into the faults of virology. As he did with the measles trial, Dr. Lanka compiled a very convincing case for why "viruses" do not exist and why virology is a pseudoscience built upon fraudulent foundations.

The 7 steps to prove "viruses" do not exist:

1. [Virologists interpret the death of cells in the laboratory as viral. Due to the lack of control attempts \(experiments\), they overlook the fact that they kill the cells in the laboratory themselves and unintentionally by](#)

starving and poisoning the cells. This misinterpretation is based on a single publication by John Franklin Enders and a colleague from June 1, 1954. This publication was ruled by the highest court in Germany in the measles virus trial that it contained no evidence of a virus. This publication became the exclusive basis not only for measles virology, but for all virology since 1954 and corona hysteria.

2. Virologists mentally assemble the shortest pieces of so-called genetic information from dying cells to form a very long genetic strand, which they output as the genetic strand of a virus. This conceptual/computational process is called alignment. In doing so, they did not make the control attempts, the attempt to conceptually/computationally construct the desired genetic strand even from short pieces of so-called genetic information from non-infected sources.

3. For the alignment of a virus, virologists always need a given genetic strand of a virus. For this, however, they always use a genetically/computationally generated genetic strand and never a real one, one found in reality. In doing so, they never attempt to check whether or not so-called genetic information could also be constructed from the existing data set, including "viral" genetic material strands of completely different viruses.

4. Virologists have never seen or isolated "viruses" in humans, animals, plants or their fluids. They only did it seemingly, indirectly, and only ever by means of very special and artificial cell systems in the laboratory. They never mentioned the control attempts or documented whether they succeeded in depicting and isolating viruses in and from humans, animals, plants or their fluids.

5. Virologists have never isolated, biochemically characterized or obtained their supposed genetic material from the supposed viruses that they photograph using

electron microscope images. They have never conducted or published control experiments as to whether, after isolating these structures, it was actually possible to detect “viral” proteins (the envelope of the virus) and, above all, the viral genome, which is supposed to be the central component and characteristic of a virus.

6. Virologists report typical artifacts of dying tissue/cells and typical structures that arise when the cell’s own components such as proteins, fats and the solvents used are swirled, as viruses or viral components. Here, too, there are no control experiments with cells/tissues that were not infected but were also treated.

7. The so-called transmission attempts that virologists make to prove the transmission and pathogenicity of the suspected viruses refute the entire virology. Obviously, it is the experiments themselves that trigger the symptoms, which animal experiments provide as evidence of the existence and effectiveness of the suspected viruses. Here, too, there are no control attempts in which exactly the same thing is done, only with non-infected or sterilized materials.

<https://nateserg808.wixsite.com/my-site/post/the-controls>

Dr. Lanka explained the 7 steps himself in this short excerpt from an interview with Dr. Tom Cowan where he offered additional insight:

3. The Control Experiments

During this current “pandemic,” Dr. Lanka decided to carry out and recreate for “SARS-COV-2” the control experiments he had done during the measles trial. The experiments were conducted in three phases:

Phase 1 – The cytopathic effect

In the first control experiment, Dr. Stefan Lanka showed that what virologists attribute to the presence of a pathogenic virus can be achieved without infectious material.

Phase 2 – Construction of the SARS-CoV-2 genome

In the second control experiment, Dr. Lanka showed that what virologists call “viral genetic material actually comes from a healthy human tissue.

Phase 3 – Structural analysis of sequency data in virology

In the third control experiment, we show that with the same technique that virologists use and using nucleic acids, which are not from supposedly infectious material but from healthy human tissue, animals and plants, can construct the genome of any “virus.”

[Kontrollexperiment Phase 1 – Mehrere Labore bestätigen die Widerlegung der Virologie durch den cytopathischen Effekt](#)

Phase 1: The Cytopathic Effect

Phase 1 of Dr. Lanka’s experiments was designed to show that the [cytopathogenic effect](#), the very criteria used to determine a “virus” is present in a cell culture, can be caused by the experimental conditions themselves without “infectious” material present. The article linked above contains the study by the independent laboratory testing the cytopathogenic effect for Dr. Lanka. It is in German but it can be easily translated into English. However, as it is a rather long study, I wanted to provide my favorite breakdown of the CPE experiments from Dr. Tom Cowan’s excellent book [Breaking the Spell:](#)

“Here is the essence of Lanka’s experiment, **done by an independent professional laboratory that specializes in cell culturing.** As seen in this series of photographs, each of the four vertical columns is a separate experiment. The

top photo in each column was taken on day one, and the bottom photo was taken on day five.

In vertical column one, normal cells **were cultured with normal nutrient medium and only a small amount of antibiotics**. As you can see, on neither day one nor day five was any CPE found; the cells continued their normal, healthy growth.

In vertical column two, normal cells were again grown on normal nutrient medium and a small amount of antibiotics, **but this time, 10% fetal calf serum was added to enrich the medium**. Still, the cells in the culture grew normally, both on day one and day five.

The third vertical column shows what happened when Dr. Lanka's group used the same procedures that have been used in every modern isolation experiment of every pathogenic virus that I have seen. **This included changing the nutrient medium to "minimal nutrient medium"—meaning lowering the percentage of fetal calf serum from the usual 10% to 1%, which lowers the nutrients available for the cells to grow, thereby stressing them—and tripling the antibiotic concentration**. As you can see, on day five of the experiment, the characteristic CPE occurred, "proving" the existence and pathogenicity of the virus—except, **at no point was a pathogenic virus added to the culture**. This outcome can only mean that the CPE was a result of the way the culture experiment was done and not from any virus.

The fourth and final vertical column is the same as vertical column three, except that to this culture, a solution of pure RNA from yeast was added. **This produced the same result as column three, again proving that it is the culture technique—and not a virus—that is causing the CPE."**

For Dr. Lanka's own breakdown of the phase 1 results, please

see this interview with Dean Braus:

Phase 2: Construction of the “SARS-CoV-2” genome

Phase two of the control experiments looked to show that the “viral” material in the “SARS-COV-2” genome actually comes from healthy human tissue. Dr. Lanka joined Kate Sugak to discuss the findings in the below video:

Phase 3: Structural analysis of sequency data in virology

Phase 3 was designed to show that by using materials from many different sources (healthy humans, animals, plants, and synthetic nucleic acids), the PCR amplification process can create the genomes for any “virus.” I’ve provided the abstract from the study performed by the independent researchers working with Dr. Lanka to give a short overview of what was found:

Structural analysis of sequence data in virology: An elementary approach using SARS-CoV-2 as an example

“De novo meta-transcriptomic sequencing or whole genome sequencing are accepted methods in virology for the detection of claimed pathogenic viruses. In this process, no virus particles (virions) are detected and in the sense of the word isolation, isolated and biochemically characterized. In the case of SARS-CoV-2, total RNA is often extracted from patient samples (e.g.: bronchoalveolar lavage fluid (BALF) or throat-nose swabs) and sequenced. **Notably, there is no evidence that the RNA fragments used to calculate viral genome sequences are of viral origin.**

We therefore examined the publication “A new coronavirus associated with human respiratory disease in China” [1] and the associated published sequence data with bioproject ID PRJNA603194 dated 27/01/2020 for the original gene sequence proposal for SARS-CoV-2 (GenBank: MN908947.3). A repeat of

the de novo assembly with Megahit (v.1.2.9) showed that the published results could not be reproduced. We may have detected (ribosomal) ribonucleic acids of human origin, contrary to what was reported in [1]. **Further analysis provided evidence for possible nonspecific amplification of reads during PCR confirmation and determination of genomic termini not associated with SARS-CoV-2 (MN908947.3).**

Finally, we performed some reference-based assemblies with additional genome sequences such as SARS-CoV, Human immunodeficiency virus, Hepatitis delta virus, Measles virus, Zika virus, Ebola virus, or Marburg virus to study the structural similarity of the present sequence data with the respective sequences. **We have obtained preliminary hints that some of the viral genome sequences we have studied in the present work may be obtained from the RNA of unsuspected human samples."**

Download

PDF:

[structural_analysis_of_sequence_data_in_virology \(1\)](#)

To hear Dr. Lanka's explanation of this phase, please see this excellent interview once again with Kate Sugak:

Drs. Sam and Mark Bailey's Tribute to Dr. Lanka

For an even greater in-depth look at the brilliant work of Dr. Lanka, please see [this excellent video tribute](#) by the Baileys. From an outline provided by Dr. Mark Bailey, in this 30 minute video they cover:

- Dr. Lanka's early discoveries that bacteriophages and giant "viruses" are able to be truly isolated but are not pathogenic
- Dr. Lanka's path as a virologist and the realization that the model was wrong
- How Dr. Lanka spoke out from the very early stages against the HIV/AIDS dogma

- Dr. Lanka's discovery that the germ theory and disease entity models are incorrect
- A look at Dr. Lanka's 7 points that refute virology on their own terms
- The 3 phases of the "SARS-CoV-2" control experiments performed in 2021 that were used to refute the "virus" hypothesis
- And the optimism for the future as many of us are now standing on his shoulders to spread the knowledge he has given us

[Stefan Lanka: "Virus, It's Time To Go."](#)

The Road Less Traveled

Sadly, it is often a lonely road for anyone willing to break away from tradition and speak out about the troubling state of their chosen profession, especially in a field with ties to a highly lucrative pharmaceutical conglomerate. More often than not, anyone who is willing to sound the alarm has their work smeared and their reputations tarnished by colleagues and the mainstream media in order to discredit the information and the charges that have been brought forth. We are fortunate enough that there were a few brave men and women who were able to see through the indoctrination of their training and push through the often painful cognitive dissonance which comes with having to change long held beliefs ingrained from birth.

Dr. Lanka helped to pave the path against virology and many of us are walking in his footsteps today. His refutation of the germ theory paradigm using their own history and methods was highly influential to myself and others. His status as an ex-virologist not only gave him an invaluable insiders look at the fraud the field is entrenched in but also the clout necessary for those hesitant about the information shared to actually listen up and to start asking the hard questions

themselves. We are greatly indebted to Dr. Lanka for his trailblazing work. Without his herculean efforts, I highly doubt that we would be able to attack this fraudulent field as successfully as we are able to do so now.

Essential Reading:

I wanted to provide a list of Dr. Lanka's work which I consider essential reading for anyone questioning the germ theory lies and/or looking to gain more knowledge of the foundational problems that the field of virology is built upon. Many of these were sources I read initially in my own journey which I found extremely helpful in broadening my own understanding. I am positive that this list will be a benefit to others as well:

[**Dr. Stefan Lanka Debunks Pictures of Isolated "Viruses"**](#)

[**HIV Pictures: What They Really Show**](#)

[**HIV: Reality or Artefact?**](#)

[**INTERVIEW STEFAN LANKA: Challenging BOTH Mainstream and Alternative AIDS Views**](#)

[**Virologists**](#)

[**The Virus Misconception Part 1**](#)

[**The Virus Misconception Part 2**](#)

[**The Virus Misconception Part 3**](#)

[**The Misinterpretation of Antibodies**](#)

[**Connect with Mike Stone**](#)

cover image is screenshot from [Kate Sugak video](#)

Mark Bailey With Jeremy Nell on Virus Hunting

[Mark Bailey on Virus Hunting](#)

Is there any evidence that viruses exist and cause illness?

by [Jeremy Nell](#), [Jerm Warfare](#)

August 8, 2022

Mark Bailey is a medical doctor and husband to [Sam Bailey](#) (who is also a doctor).

Sam is probably [the initial reason](#) why I changed my views on viruses. Her [videos](#) inspired me to read two excellent books;

- [Virus Mania](#), and
- [Bechamp Or Pasteur?](#)

I have since had the pleasure of chatting to many individuals who approach virology with caution, including [Andy Kaufman](#), [Denis Rancourt](#), [David Rasnick](#), and [Tom Cowan](#).

As it turns out, Mark is the mastermind behind a bunch of Sam's videos and the [No Virus Challenge](#).

The Challenge

The following is the official challenge, signed by a group of great minds.

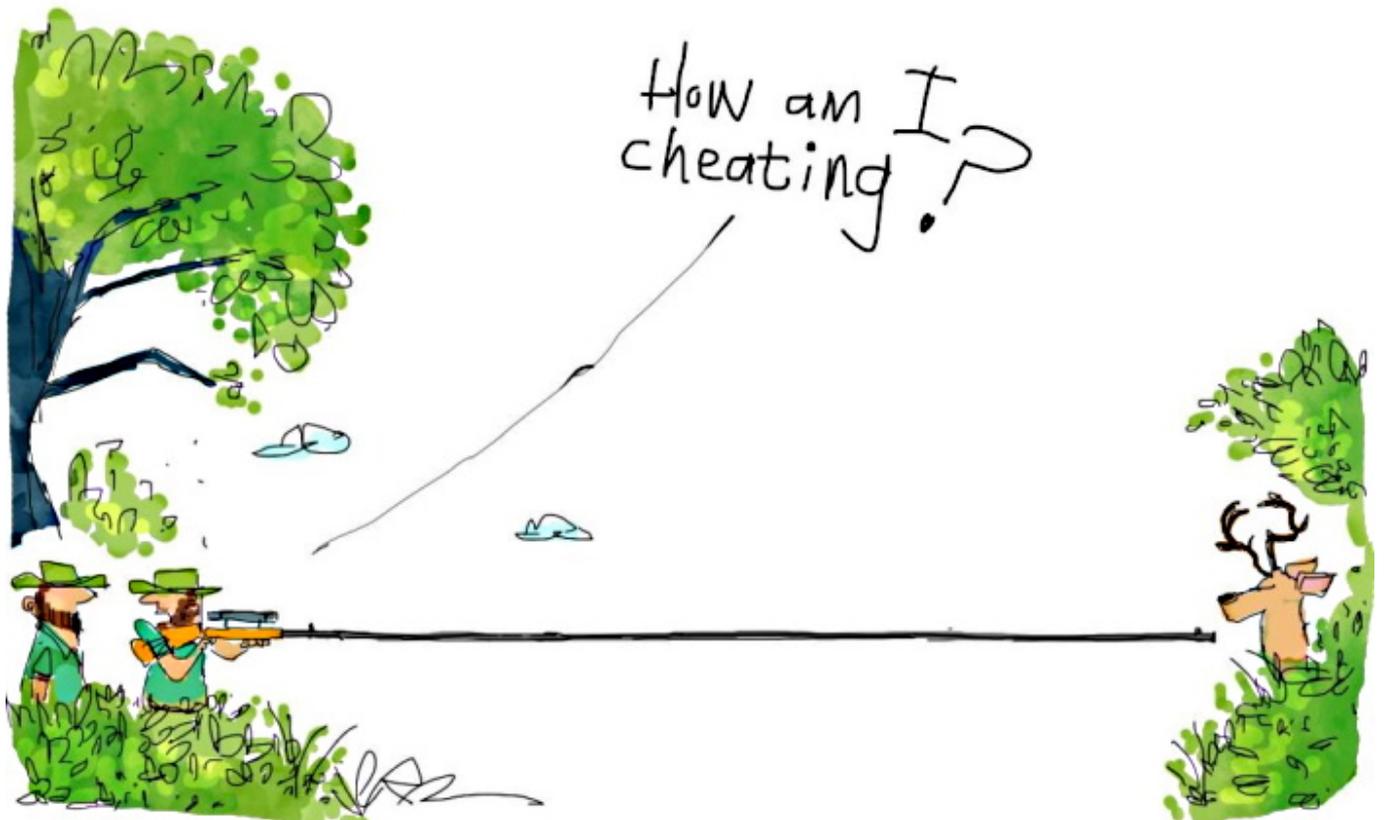
[Settling the Virus Debate PDF](#)

It's neither a gotcha nor is it rigged to favour a particular outcome.

Proper Science

The challenge is simply to provide [real-world evidence of SARS-CoV-2](#) using ~~computer models~~ the [Scientific Method](#) (which is completely ignored in [pharmaceutical science](#)).

A photo isn't enough because it says nothing about causality. A photo of hyenas eating a dead antelope says nothing about whether or not the hyenas killed the antelope. (A hunter might have killed it and the hyenas arrived later.)



Furthermore, [reproducibility is critical](#), hence it being part of the Scientific Method. If the same results can't be repeated, then the hypothesis is false. For example, if the claim that a certain type of plastic is heat resistant under certain conditions, but tests repeatedly reveal that it is not heat resistant under the said conditions, then the claim is false.

Similarly, if the claim that SARS-CoV-2 causes [COVID-19](#), then tests must be conducted and must be reproducible.

There is nothing unusual about such logic; it is precisely how proper science works.

TNT Conversation

Mark joined me for a conversation about viruses and the aforementioned challenge. It is well worth listening to.

Podcast Conversation

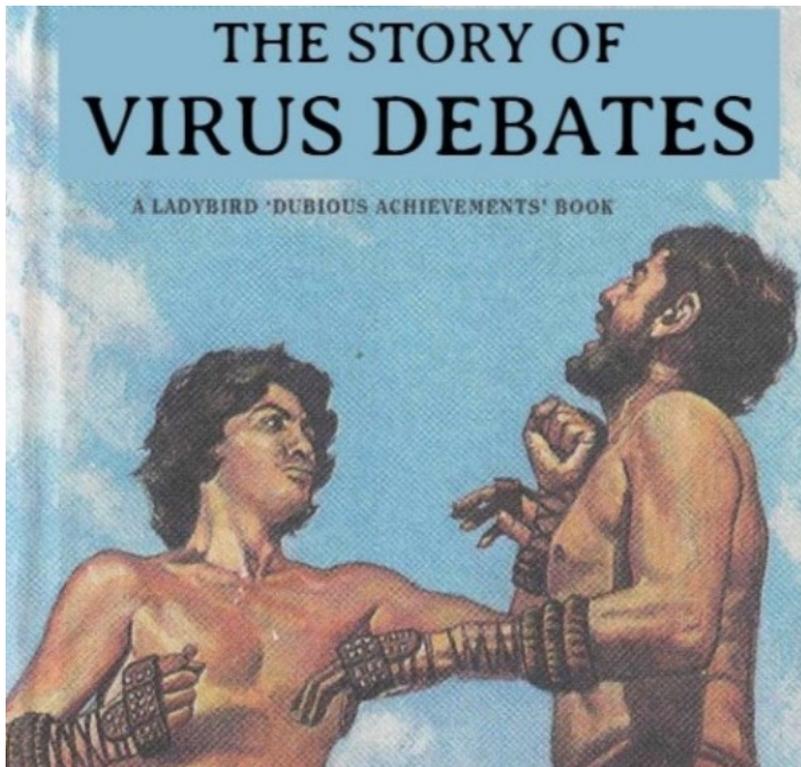
A few days after our TNT conversation, Mark joined me on my podcast for an overlapping, but more free-flowing chat with coffee, craft beer, and power failures.

[Connect with Jerm Warfare](#)

[Connect with Dr. Mark Bailey](#)

Warnings Signs You Have Been Tricked by Virologists...Again

[Warnings Signs You Have Been Tricked by Virologists...Again](#)



by [Dr. Mark Bailey](#)

July 25, 2022

Recently I joined a group of 20 doctors and scientists around the world who put their names to the “Settling the Virus Debate” [statement](#). In this two-page document we suggested, “rather than engaging in wasteful verbal sparring, let us put this argument to rest by doing clear, precise, scientific experiments that will, without any doubt, show whether these claims are valid.” Some of the individuals who believe that the existence of pathogenic viruses is an established fact, proceeded to immediately disagree. One was [Steve Kirsch](#), who attempted to distract from the central tenet of our statement, being that virology had failed to carry out scientific control experiments. In reality, it is clear that the virologists have not shown that their techniques of “viral” cultures, genomics, and clinical diagnostics are valid even on their own terms. Indeed, I have not seen Kirsch or anyone else provide evidence that the appropriately-controlled experiments we suggested in the statement have been performed.

Kirsch admitted, “this is not my field of expertise at all. I rely on other people around me who I trust.” I have written a previous [article](#) about why I think Kirsch should be careful about trusting other “experts.” However, he continues to favour this approach and one of his trusted parties includes the pathologist/virologist Dr Sin Lee. Lee wrote, “Tom Cowan claimed the virus has not been isolated. But the virus has been isolated by the CDC and marketed by ATCC as the control materials. I bought the virus as the control for my CLIA tests. Many others do.” We have covered the follies concerning these claims of “isolation” many times and the CDC certainly have no studies demonstrating the existence of a pathogenic particle termed ‘SARS-CoV-2’. The ATCC simply repeat the claim by the CDC that their listed product contains a “virus” – however as I outlined in my first “Warning Signs” [article](#), following the trail back to the start does not lead to any evidence of a virus in the biological potions being passed around.

On 18 July 2022, Lee sent the following email to [Dr Tom Cowan](#):

I have a Preprint manuscript currently under peer review as follows. [://www.preprints.org/manuscript/202206.0192/v1](https://www.preprints.org/manuscript/202206.0192/v1)
There is irrefutable Sanger sequencing evidence that the virus exists and keeps mutating. If Dr. Tom Cowan disagrees, please write a critique to challenge my data and interpretation online in the open. I will respond. Other scientists can join in for the debate.

Dr Sin H. Lee, 18 July 2022

The preprint [paper](#) is titled, “Implementation of the eCDC/WHO Recommendation for Molecular Diagnosis of SARS-CoV-2 Omicron Subvariants and Its Challenges.” To expose the problems of virology it is crucial to examine the methodology section of any publication and in this case it is no different. In the “material and methods” section Lee stated that, “five (5) selective nasopharyngeal swab specimens collected from non-

hospitalized patients with respiratory infection, which were confirmed to be true-positive for SARS-CoV-2 Omicron variant by Sanger sequencing.” Here we are straight into the deep end of virology’s circular reasoning: the “virus” has been confirmed to exist on the basis of detected sequences from some nasopharyngeal swabs. There is nowhere in the paper that any evidence is provided for the existence of an actual virus, that is, a tiny particle that acts as an obligate intracellular parasite and is capable of causing disease in a host.

The claim that the specimens were, “true-positive[s] for SARS-CoV-2 Omicron variant,” simply means some sequences that were previously deposited on genetic databases, and fraudulently declared to be “viral,” were being detected again. It doesn’t make any difference which sequencing technique is used, in this case bidirectional Sanger sequencing because the crucial issue is the provenance and clinical relevance of these detected sequences. This is the foundational issue in the entire COVID-19 fraud: there is no virus, simply sequences falsely claimed to be evidence of an actual virus. The World Health Organisation helped orchestrate the deception when it declared that a confirmed ‘case’ of infection with the invented virus is simply the detection of some of these sequences. We have covered this absurd circular reasoning in much of our work including in Sam’s 2020 [video](#) “What Is A Covid-19 Case?” (And rapid antigen tests are covered [here](#).)

Back to Lee’s paper and in the following paragraph of the “material and methods” section, he described the, “RNA Extraction from Nasopharyngeal Swab Specimens,” as follows:

As previously reported [25-27], the cellular pellet derived from about 1 mL of the nasopharyngeal swab rinse along with 0.2 mL supernatant after centrifugation was first digested in a buffered solution containing sodium dodecyl sulfate

and proteinase K. The digestate was extracted with phenol. The nucleic acid was precipitated by ethanol and redissolved in 50 µL of DEPC-treated water.

In other words, there was no step to demonstrate: (a) there were any “viral” particles contained within the samples, or (b) that the RNA came from such imagined viral particles. A reverse transcription polymerase chain reaction was then applied to these undifferentiated samples to generate amplicons ranging from 398 to 707 nucleotides in length. Most of these sequences spanned the so-called ‘Spike protein’ gene of the alleged SARS-CoV-2 genome, as that was the area of interest for the study. In the next step it was stated:

The crude nested PCR products showing an expected amplicon at agarose gel electrophoresis were subjected to automated Sanger sequencing without further purification.

In fact, at no stage was an attempt undertaken to purify any entity from the crude nasopharyngeal specimens. The entire basis of the study was built on the unestablished premise that the genetic sequences detected were already known to come from inside a pathogenic particle.

The “results” section then detailed the nucleotide sequences of the various amplicons that were generated from the crude samples. Some of the codons (three-nucleotide units that encode a particular amino acid or stop signal) were described as “mutated” on the basis of comparisons to other sequences previously deposited on the genetic databanks. The use of the word ‘mutation’ is problematic in itself, because it implies that a *genome* has been altered. A genome must belong to a discrete biological entity, so virology is once again misusing terminology to imply that a certain proof has been established. Lee’s study was simply looking at RNA sequences in uncontrolled experiments.

Those of us that dispute the virus narrative point out that no RNA (or DNA) sequences have ever been shown to come from

inside any specific identifiable particle that fulfils the definition of a virus. Thus all RNAs can only be said to be expressed by a known organism, introduced artificially (e.g. synthetic mRNA injections) or be of unknown provenance. The “mutations” only exist within *in silico* models that have not been shown to be independent entities in nature. There are other reasons why RNA sequences can and do vary in dynamic biological systems and I can't imagine that any virologist would disagree with this fact. Simply detecting RNAs is not enough to draw conclusions about their provenance. Other experiments are required to make this determination.

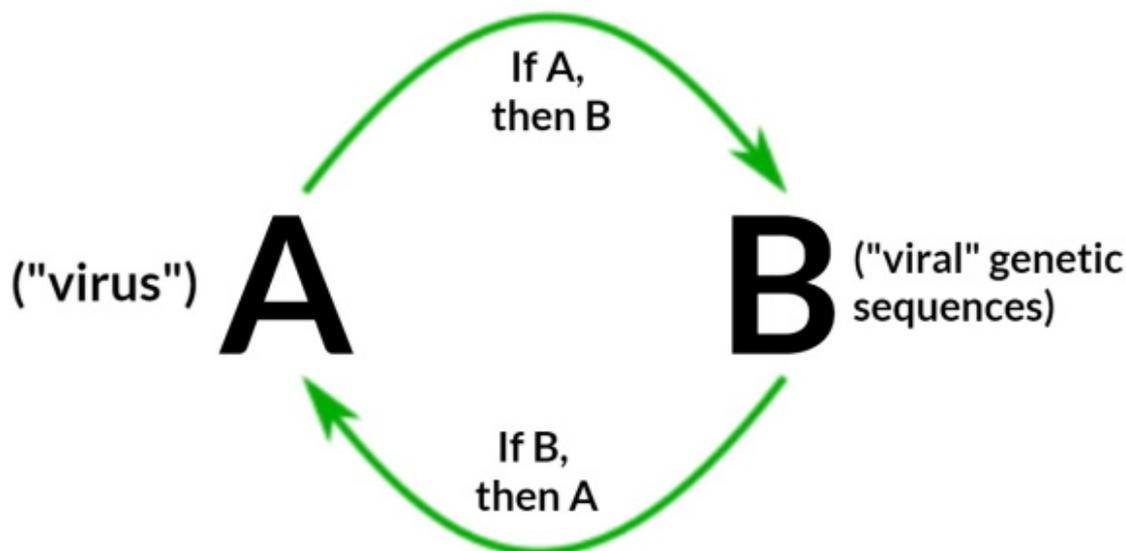
In our first COVID-19 Fraud [essay](#) we documented the original invention of SARS-CoV-2 by Fan Wu's team who assembled an *in silico* “genome” from genetic fragments of unknown provenance, found in the crude lung washings of a single ‘case’ and documented in, “A new coronavirus associated with human respiratory disease in China.” Their *in silico* construct served as a reference for others to then “find” the same “virus” around the world, without evidence that such a particle actually existed.

In our soon to be published follow-up COVID-19 Fraud essay we will provide a more detailed explanation as to why detecting nucleic acid sequences *per se* in crude specimens or cell cultures does not provide the required evidence for “viruses.” In the essay we will also follow the trail back to the first ever declarations of “coronavirus genomes” in the 1980s and show that no viruses were demonstrated in any part of the trail. However, such sequence data is used to promulgate the illusion of “virus” family trees, or claimed “mutations” as discussed above.

Dr Lee's paper does not even appear to be designed to demonstrate the existence of a postulated disease-causing particle. I sent him several questions including, “I have read the preprint and there does not appear to be a hypothesis presented – is that correct?”, “In your study there did not

appear to be any controls (e.g. checking for selected sequences in other nasopharyngeal specimens from humans said not to have the alleged virus) – presumably that was by design?” and “What is your definition of a ‘virus’ in the paper?” Lee responded, “your questions are irrelevant to you [sic] intention to write a comment or critique on the manuscript involved,” and suggested I write something in the preprint website’s comment section.

Lee has provided a descriptive paper that omits a falsifiable hypothesis so it is unclear why he would present it as experimental evidence, let alone “irrefutable” evidence of the existence of SARS-CoV-2. His paper is inappropriately designed for this purpose and his claim engages in a circular reasoning fallacy: the genetic sequences are proffered as evidence of the virus, because it was presupposed that they come from the virus. We are asking, “where is the virus?”



Virology has a problem: It needs to show that “A” actually exists

It’s back to the drawing board for virology: it invented the theory of viruses, so whatever method it employs to prove their existence, it must satisfy that definition. In fact, do the virologists even have a theory? The definition of a

scientific theory is:

an explanation of an aspect of the natural world and universe that has been repeatedly tested and corroborated in accordance with the scientific method, using accepted protocols of observation, measurement, and evaluation of results.

Our "[Settling the Virus Debate](#)" statement proposes that the virologists need to employ the required scientific method as a starting point. It is not looking good for them because they have not even demonstrated any internal validity on their own terms. According to science they may not even have a theory. If they have a hypothesis, they need to specify an independent variable (in this case the postulated "virus") and a dependent variable for analysis. Moreover, to even get started, the independent variable must first be shown to physically exist. I would implore Steve Kirsch to reconsider taking advice from these "experts" and to commence his own investigations into the house of virology. By scientific accounts, it is a house of cards.

Postscript

(Derived from: A. F. Chalmers, *What is this thing called Science?*, 2nd ed, 1982)

'Observational statements are frequently presupposed by theory. Such statements are always made in the language of some theory and will be as precise as the theoretical or conceptual framework that they utilise is precise'. In this instance, a virus particle was not observed first and subsequently viral theory and pathology developed. Scientists of the mid and late nineteenth century were preoccupied with the identification of *imagined* contagious pathogenic entities.

'The observations of the naïve inductionist did not identify a virus *a priori*, and then set about studying its properties and characteristics. The extant presupposition of the time was

that a very small germ particle existed that may explain contagion. What came thereafter arose to fulfil the presuppositional premise’.

‘A popular view of scientific knowledge is that it is proven knowledge and scientific theories are derived in some righteous way from the facts of experience acquired by observation and experiment. Science is based upon what we can see, hear, measure and touch. Science is objective and explicit. Scientific knowledge is reliable knowledge because it is objectively proven knowledge’.

‘A realistic scientific theory will consist of a complex of universal statements rather than a single statement. Further a theory will need to be augmented by auxiliary assumptions, such as laws and theories governing the use of any instruments used, for instance’.

‘The premises from which the prediction is derived must also include the interconnected statements that constitute the theory under test, the initial conditions, and the auxiliary assumptions. Falsification of the theory also indicates the possibility of a failure of any number of the associated assumptions and conditions, and not necessarily of the theory itself’.

Acknowledgement

I would like to express my gratitude to [Dr M. C. McGrath](#) (New Zealand) for his constructive criticisms and inspiration for the postscript.

[Connect with Dr. Mark Bailey](#)

cover image based on creative commons work of [geralt](#)

Jon Rappoport With Dr. Sam Bailey: The Virus Cover Story

[Jon Rappoport With Dr. Sam Bailey: The Virus Cover Story](#)

by [Dr. Sam Bailey](#)

July 12, 2022

I've just interviewed the one and only Jon Rappoport, who launched his website nomorefakenews.com over 20 years ago. Jon is now 84 years old but continues with his prolific output and is always at the forefront of exposing global scams.

We talked about:

- identifying the COVID-19 fraud in early 2020
 - why he started investigating virology 35 years ago
 - why people need the virus narrative
 - the state of the health freedom movement
- plus much more!

[Connect with Dr. Sam Bailey](#)

[Connect with Jon Rappoport](#)

Monkeypox Mythology

[Monkeypox Mythology](#)

by [Dr. Sam Bailey & Dr. Mark Bailey](#)

May 23, 2022

“Monkeypox” – who could have seen it coming? Well, apparently the organisation founded by Ted Turner in 2001 called the ‘Nuclear Threat Initiative’ (NTI) saw it coming when they published a report in November 2021 called, “[Strengthening Global Systems to Prevent and Respond to High-Consequence Biological Threats](#).” The report states that in March 2021, they partnered with the Munich Security Conference to run an exercise scenario involving a, “deadly, global pandemic involving an unusual strain of monkeypox virus that emerged in the fictional nation of Brinia and spread globally over 18 months...the fictional pandemic resulted in more than three billion cases and 270 million fatalities worldwide.”

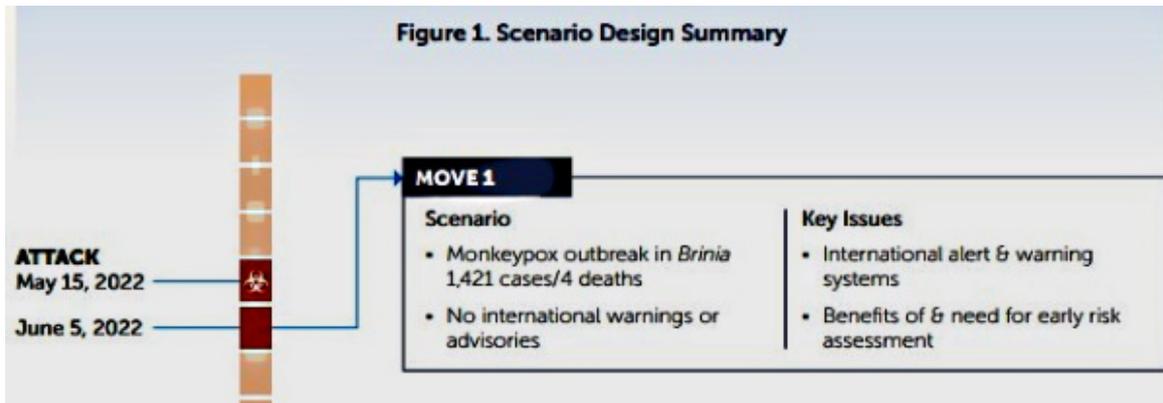


The Nuclear Threat Initiative introduces Plandemic 2.0?

This time it is even bigger and monkeypox takes centre stage.

Amazingly, the scenario had the monkeypox outbreak emerging as a result of an act of bioterrorism in May 2022, right where we are now. We have dealt with [gain of function garbage](#) involving non-existent viruses in several other [videos](#), while Dr Stefan Lanka has also [dismantled](#) such fallacies. Regardless, the NTI's report suggests that what is required in a fantasy outbreak is, "aggressive measures to slow virus transmission by shutting down mass gatherings, imposing social-distancing measures, and implementing mask mandates". The winning countries, in their hallucination implemented, "large-scale testing and contact-tracing operations and scaled-up their health care systems."

Their charts, which seem to be produced by Neil Ferguson's calculator, show that countries that don't comply with their restrictions and medical interventions will be far worse off. The report goes on to state, "both the exercise scenario and the COVID-19 response demonstrate that early actions by national governments have significant, positive impacts in managing the impact of the disease". When they say "positive impacts" it is not quite clear who is on the receiving end, although they note that "the COVID vaccine market will exceed \$150 billion in 2021." All in all the NTI's report reads like Event 201 on Ritalin. ([Event 201](#) took place on 18 October, 2019. It was an exercise involving a, "coronavirus pandemic" just months before the COVID-19 "pandemic" was declared.)



Monkeypox attacks right on cue!

As with COVID-19 it appears that other parties have also been eagerly awaiting a market such a “pandemic” would present. Likewise, these fortune-tellers were preparing vaccines to go where no vaccine had gone before. In this case the biotech company Bavarian Nordic gained approval from the FDA in 2019 to market [JYNNEOS](#), a smallpox and monkeypox vaccine. Other health authorities were also primed to react to a previously rare condition that has been of no concern for their nations...until now apparently. For example, on May 20, 2022, the UK Health Security Agency published a [document](#) titled, “Recommendations for the use of pre and post exposure vaccination during a monkeypox incident”. Like COVID-19, it’s starting to feel like all roads lead to vaccines again...



Just a matter of time before the “rare” monkeypox

vaccine comes to your neighbourhood.

So now that the scene has been set we can get into the “science” of monkeypox starting with an official description of the alleged viral disease. The [CDC states](#) that, “Monkeypox was first discovered in 1958 when two outbreaks of a pox-like disease occurred in colonies of monkeys kept for research, hence the name ‘monkeypox.’ The first human case of monkeypox was recorded in 1970 in the Democratic Republic of Congo.” They go on to [state](#) that, “in humans, the symptoms of monkeypox are similar to but milder than the symptoms of smallpox.” The illness is said to be flu-like with the addition of lymph node swelling and then development of a rash, and then lesions that progress from macules to vesicles to scabs.

In terms of the lethality of monkeypox, the CDC state that, “in Africa, monkeypox has been shown to cause death in as many as 1 in 10 persons who contract the disease.” This 10% fatality rate has already stoked the fear narrative and was also used as the case fatality rate in the NTI’s monkeypox pipe dream. It should be noted that historically monkeypox has been virtually unheard of in first world countries and the rare cases are usually in people that have recently arrived from Africa.

Indeed, one of the only recorded “outbreaks” of monkeypox in the first world was in the United States in April 2003. Cases were [declared in 6 states](#) and said to be caused by rodents that were imported to Texas from Ghana. This was the first time monkeypox had been reported outside of Africa and the CDC published a [paper](#) in 2006 analysing the incident. The paper states that, “person-to-person spread of the virus is *thought* to occur principally via infectious oropharyngeal exudates” although it is clear that this has never been scientifically established. They continue to say that, “the virus is *thought* to have been transmitted from African

animals” – in other words, it’s another species-jumping pathogen tale.

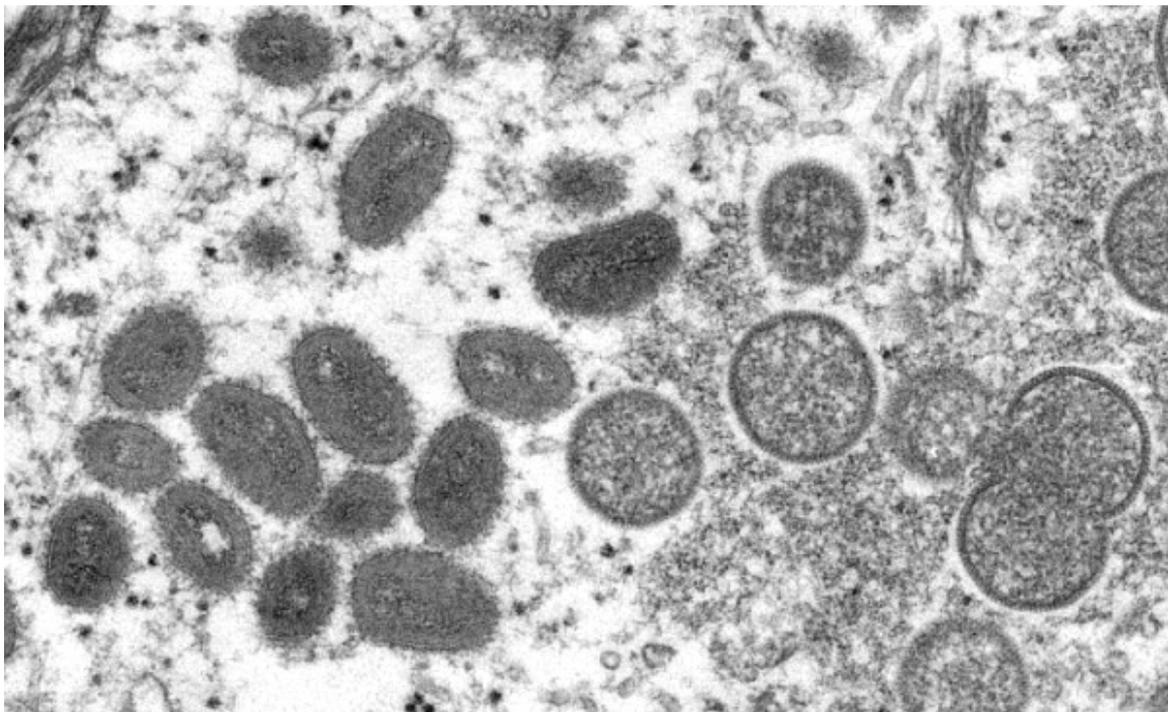


Blaming it on minority groups, when have we seen that before?

They reported that, “individuals who had illness onset within 21 days after exposure to MPXV [Monkeypox virus] who experienced fever (defined as a body temperature greater 37.4°C) and vesicular pustular rash or rash (potentially uncharacterized) plus orthopox IgM antibodies were classified as having probable cases of infection.” Now 37.4°C is not a fever in our book, it is a normal body temperature and we would suggest 37.6°C and above qualifies as a fever. We noted in their chart that they were using the classification $\geq 39.4^{\circ}\text{C}$, but this appears to be an error as in another paper, we’ll get to soon, it was once again 37.4°C . The second paper even said the “fever” could be subjective, so they appear to be using this loose criteria and pathologising a normal state. Additionally, the CDC’s [weekly report](#) from the 11th of July 2003, stated that from a total of 71 cases, only “two patients, both children, had serious clinical illness; both of these patients have recovered.” The remainder had a variety of

respiratory and gastrointestinal symptoms.

The CDC's cases were confirmed on the basis of specimens that showed: "monkeypox virus isolation, detection of monkeypox-specific nucleic acid signatures, positive electron-microscopy findings, or positive immunohistochemical findings". We had a look at the electron micrographs presented by the CDC including the [image](#) shown below of a skin sample from one of the patients. The caption informs us that the round particles on the right are immature monkeypox virions, while the oval particles on the left are mature viruses. However, all they have is a static image of dead tissue and no conclusions can be made about the biological role of the imaged particles. None of them have been shown to be replication-competent disease-causing intracellular parasites and so should not be called 'viruses'.



The oldest trick in the book: Image some vesicles and call them "viruses". To see why this is insufficient watch [Electron Microscopy and Unidentified "Viral" Objects](#).

Looking at the CDC's weekly report from 2003 again, it appears that the 35 "laboratory-confirmed cases" all involved

polymerase chain reaction (PCR) “tests”, so we investigated the scientific evidence behind this claim. One of the citations for the development of PCR detection of monkeypox is a 2004 [paper](#) titled “Real-Time PCR System for Detection of Orthopoxviruses and Simultaneous Identification of Smallpox Virus”. Now a PCR protocol requires them to know the genetic sequences of the alleged monkeypox virus, which takes us to this 2001 [paper](#) titled, “Human monkeypox and smallpox viruses: genomic comparison”. The paper claimed to have “isolated” the monkeypox virus in a rhesus monkey kidney cell culture from a scab of a monkeypox patient. Here the virologists are up to their old tricks again by asserting that: (a) the patient’s scab contains the monkeypox virus, and (b) it is now in their culture brew. They claimed to have sequenced the “viral genome” by referring to a process described for sequencing an alleged variola virus in 1993.

But when we look at this [paper](#) there is no virus demonstrated either, simply an assertion that it was “isolated” from, “the material from a patient from India” in 1967. They go on to make the claim that, “the virions were purified by differential centrifugation and viral DNA was isolated” – however, there is no demonstration of what they purified or how they were determined to be virions. In none of these experiments did they perform any controls by seeing what sequences can be detected from other human-derived scabs or similar specimens from unwell individuals. This is where we need to remind the virologists of what a virus is supposed to be – that is a replication-competent intracellular parasite that infects and causes disease in a host. It is not detecting genetic sequences contained within scabs and claiming that it belongs to a virus.

So returning to the CDC’s paper describing the 2003 “outbreak”, it is unclear how they established they could be diagnosing anyone with monkeypox by using the PCR. Their PCR can only have been calibrated to sequences of unproven

provenance. Additionally, it doesn't matter what kind of analytical specificity their PCR protocol had, there was no established diagnostic specificity – in other words it was not a clinically-validated test, an issue that goes beyond whether the “virus” exists or not. (From the [MIQE Guidelines](#): *Analytical specificity* refers to the qPCR assay detecting the appropriate target sequence rather than other, nonspecific targets also present in a sample. *Diagnostic specificity* is the percentage of individuals without a given condition whom the assay identifies as negative for that condition.)

The 47 US cases they ended up describing were all in some sort of contact with imported African prairie dogs and the CDC's paper concludes that, “individuals contracted MPXV infections from infected prairie dogs; no human-to-human transmission was documented, but there were many different potential scenarios of infection involving respiratory and/or muco-cutaneous exposures, percutaneous and/or inoculation exposures”. Now there were some problems with the study design which they admitted to including that, “the analyses were limited by incomplete reporting or recall of information by patients. And, because of the retrospective nature of the study, we were unable to obtain highly detailed data”.

However, even allowing some wriggle room for them here, the inconsistencies go further still. Firstly, no one in the US incident died from the disease which is said to have a 10% fatality rate in Africa. No doubt, the inconsistent lethality rates will be attributed to different “variants”, but there can't be variants of something that doesn't exist.

There were few images available of the skin lesions that were reported in the 2003 incident but two of the US cases are depicted below and an image from a monkeypox case in Africa is shown for comparison. The reader can make up their own mind but those skin reactions do not look remotely comparable to us.



African child with monkeypox



US child with monkeypox



US man with monkeypox

□□Next, the [CDC claim](#) that, “the natural reservoir of monkeypox remains unknown. However, African rodents and non-human primates (like monkeys) may harbor the virus and infect people” – in other words it’s all rather vague and remains an unproven hypothesis. Now, obviously some people became unwell in the US in 2003 but with the viral theory we are supposed to believe that it jumped from some prairie dogs to some humans and the latter became infected with the alleged virus...but then no human could pass it on to another human. The theory falls flat – a virus needs to spread, if it can’t spread, it’s dead and thus it’s not a virus. And the historical patterns of alleged monkeypox virus outbreaks make no sense – why did it pass to these people so easily and yet it can go a decade between alleged “outbreaks”?

Unfortunately, the 2003 incident was investigated as though the viral contagion theory had already been established and other explanations were ignored. If people were allegedly getting sick from these African rodents, wouldn’t it be a good idea to check the animals for other toxicities, particularly in their faeces and also for any ticks or parasites? We did note another [reference](#) state that with regards to the US

cases, “many of the people had initial and satellite lesions on palms, soles, and extremities”. However, according to the CDC, monkeypox usually starts on the face so the clinical picture in the US cases was not consistent with cases that are typically described in Africa.

In any case, a review of the scientific evidence revealed that with regards to monkeypox: (a) there is no evidence of a physical particle that meets the definition of a virus, (b) there is no evidence of anything transmitting between humans, and (c) there is no way to confirm a diagnosis of monkeypox unless you believe in clinically-unvalidated tests such as the PCR kits that have been produced. In other words, if we see a monkeypox “pandemic” that is used as an excuse to role out more globalist terrorism, it will be on the back of another [PCR pandemic](#), not one that has any basis in nature.



For those of you wanting to explore more problems with the various monkeypox claims, Mike Stone of ViroLIEgy has written a couple of interesting commentaries. The first [article](#) is, “Was Smallpox Really Eradicated?”, which among other things

deals with the convenient emergence of monkeypox while smallpox was apparently being eradicated. The second [article](#) is, “Did William Heberden Distinguish Chickenpox From Smallpox in 1767?” This outlines the fact that the pox conditions are not as readily distinguishable from each other as the text books suggest and appear to relate more to the severity of a similar disease process. You can also watch our [video](#), “Chickenpox Parties and Varicella Zoster Virus?” to see why there is no evidence of a virus in that related condition either.

From the perspective of terrain theory it is a fundamental mistake to attribute a person’s illness to a supposed virus, as the subsequent “treatments” don’t address the underlying issues. If someone is unwell, then they are usually deficient in nutrients and need to restore balance, or they have been exposed to environmental toxins and need to help the body detoxify. Wars against alleged pathogens that involve treating everyone the same way with civil rights restrictions and vaccines are certainly not about health. It is good to see more people waking up to the [COVID-19 fraud](#) so there is hope that a monkeypox scamdemic, if attempted, will bring even more light to the situation. As always, your best health is in your own hands, not in the hands of a globalist cult and their cronies.

If you have been outsourcing your health, there has never been a better time to free yourself from the virus fear narrative and begin manifesting your full potential instead.

[Connect with Dr. Sam and Dr. Mark Bailey](#)

cover image credit: [CDD20](#)

Warning Signs You've Been Tricked by Virologists

[Warning Signs You've Been Tricked by Virologists](#)

by [Dr. Mark Bailey](#)

February 1, 2022

It was Steve's first day
looking for viruses in
the Genomics Lab.
He asked,
"how does this all work?"

Jeremy started
humming...

"1, 2...
add a few...
99, Corona!"



"Viruses are small obligate intracellular parasites, which by definition contain either a RNA or DNA genome surrounded by a protective, virus-coded protein coat."

Medical Microbiology, 4th edition, 1996

The question regarding the existence of pathogenic viruses remains an important one as the belief in such viruses dictates billions of dollars of resources and research funds. In the past two years we have also seen how an alleged virus can be used as a political tool to bring populations to heel. It is not the first time this has happened: for

example, the “discovery” of HIV in the 1980s set up a multi-billion dollar industry and has also been used politically in most corners of the world. (The fallacies regarding the existence of the HIV particle and it causing AIDS are outlined in [Virus Mania](#). For those wanting to dive more deeply into the arguments, I would recommend The Perth Group’s [magnus opus](#) on this topic.)

Independent journalist Jeremy Hammond who promotes himself as exposing “dangerous state propaganda” surrounding COVID-19 and the dangers of the vaccines, thus made the following curious [statement](#) in 2021:

“the false claim that SARS-CoV-2 has never been isolated (i.e., never proven to exist) greatly harms the credibility of the health freedom movement and is grounded in total ignorance of the science (the virus is constantly being isolated and whole genome sequenced by scientists all over the world)”

Jeremy Hammond, 9 March 2021

I would argue that the ignorance falls in Hammond’s lap as he appears to reach his conclusion by essentially repeating the claims made by virologists and reassuring the audience that their methodologies are valid. In recent weeks we have also seen [Dr Joseph Mercola](#) presenting Hammond’s interview and Steve Kirsch’s [blog](#) (that also makes appeals to virology authority) as “evidence” that SARS-CoV-2 exists. Kirsch states that he relies on “expert opinions of people I trust” which means that he has put the argument into the hands of others rather than investigating the issue himself. But is it wise for these health freedom fighters who are battling establishment COVID “experts” to not also question the establishment virologists?

[Dr Andy Kaufman](#) produced a point by point refutation of Hammond’s support of modern virology’s “isolation”

methodology [here](#), while [Dr Tom Cowan](#) warned that we are just getting started with dismantling virology's nonsense [here](#). [Dr Sam Bailey](#) has published many videos covering the virus isolation issue – most of which have been banned from YouTube but can still be found on [Odysee](#). Additionally, in an essay I co-authored with Dr John Bevan-Smith, we describe the first pillar of the [COVID-19 fraud](#) as virology's misuse of the term "isolation". In summary, because virologists were unable to physically isolate any viruses last century, they simply changed the definition of the word so that even [virologists](#) admit the term is now used loosely. A strange state of affairs when the scientific method calls for precise terminology.

My observation over the past two years has been that many scientists, doctors, and journalists are happy to jump over this "isolation" chasm and cite the "coronavirus genomes" deposited in databases as proof that the virus must exist. For example, Steve Kirsch writes in his blog that:

"I know that Sabine Hazan verified that the sequence of the virus obtained from ATCC matched exactly what she found in people who have the virus."

Steve Kirsch, 10 January 2022

He cites Hazan's [paper](#) "Detection of SARS-CoV-2 from patient fecal samples by whole genome sequencing" as the evidence for this statement. Kirsch admits that he doesn't know how the genomes were created, but his...

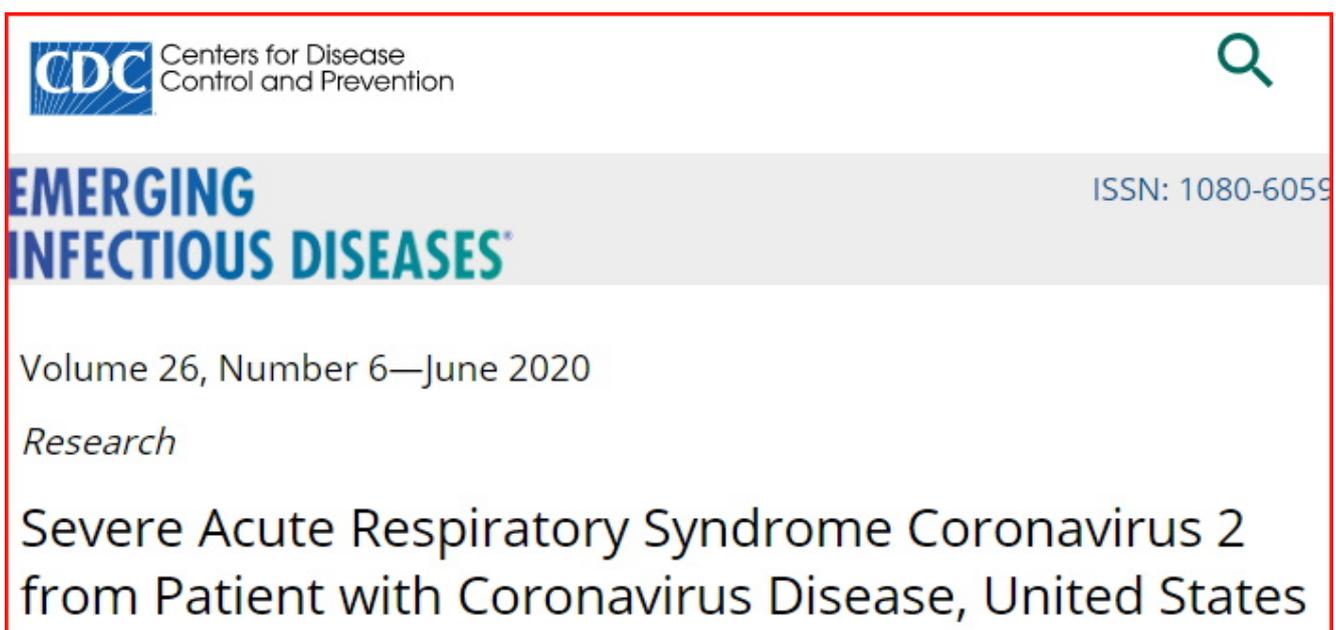
"scientist friends seem happy with them. At \$2,000 a shot, I don't think they'd market the product if it was contaminated and useless. Am I wrong?"

Steve Kirsch, 10 January 2022

Unfortunately, he appears to have been duped by the high-tech

façade of virology's genomics genie where "viruses" are created from various detected genetic sequences. In fact, sometimes the sequences are not really detected at all, as [Dr Stefan Lanka](#) is exposing in what may be virology's death blow.

We can use Hazan's paper as an example of the flawed methodology used in creating these "virus genomes". The research team obtained faecal samples from 14 participants and proceeded to see what genetic sequences they could detect in the samples. We strike the first issue in the 'methods' section when they state that "included throughout sample processing was the SARS-CoV-2 positive control from ATCC (Heat-inactivated SARS-CoV-2, VR-1986HK; strain 2019-nCoV/USA-WA1/2020)" How did they know that the sample contained the inactivated virus? Because the ATCC (American Type Culture Collection) claims that it does on their [website](#) where they state "this strain was originally isolated from a human case in Washington state and was deposited by the Centers for Disease Control and Prevention." And how did the CDC know that they had the virus? Because they claimed they found it in this paper [here](#).



But where was the virus?

In the CDC's paper, they say that they collected "clinical specimens from a case-patient who had acquired COVID-19 during travel to China and who was identified in Washington, USA". It was concluded that the patient had COVID-19 based on a PCR result that detected some sequences said to come from SARS-CoV-2. But at this point they had no proof of any virus – all they had was some detected genetic sequences from a patient with an alleged viral infection. After performing a test tube tissue culture experiment on their clinical sample and claiming that there was evidence of a virus due to non-specific cytopathic effects, they began to construct their "genome". They state that "we used 50 µL of viral lysate for total nucleic acid extraction for confirmatory testing and sequencing." This is another sleight of hand because the "viral lysate" was not demonstrated to come from a virus, it is simply a soup of broken up culture cells and other additives.

Similarly misleading was the claim they "extracted nucleic acid from isolates". They have implied that they have isolated a virus and that they know which RNA sequences came from inside it. However, this would require the alleged viral particles to be truly physically isolated by purification, which they failed to do. And I say alleged because even if they purified the particles, it would still have to be shown that they meet the definition of a virus – including being parasitic and the causal agent of disease – something that was not demonstrated by these authors or any others.

In any case, how did they know which genetic sequences belonged to the "virus" in the first place? They "designed 37 pairs of nested PCRs spanning the genome on the basis of the coronavirus reference sequence (GenBank accession no. NC045512)." And where did this "reference sequence" come from? This relates to Fan Wu, et al's [paper](#) describing the 41-year-old man who was admitted to the Central Hospital of Wuhan on 26 December 2019 with bilateral pneumonia and despite no new clinical features, was said to have a condition that was later called "COVID-19".

The specimen was of crude lung washings, so it contained a mixture of human cells and potentially all sorts of other micro-organisms and genetic fragments. They simply asserted that there was a virus in the brew. From this mixed sample they blindly generated tens of millions of different sequences and then put their software to work to see how they could fit them all together. To do this “fitting” the software searched for “contigs” or areas where different fragments appear to have overlapping sequences. Of the hundreds of thousands of hypothetical sequences generated in this fashion they identified that the longest “continuous” sequence the computer could create was about 30,000 bases long and concluded that this software creation must be the genome of the presumed new virus.

They thought this was the genome because their hypothetically generated 30,000 base sequence was 89.1% similar to, “a bat SARS-like coronavirus (CoV) isolate—bat SL-CoVZC45”. The “genome” for the bat CoV “[isolate](#)” was generated in 2018 after “19 degenerated PCR primer pairs were designed by multiple alignment of available SARS-CoV and bat SL-CoV sequences deposited in GenBank, targeting almost the full length of the genome.” So in other words, they already knew the sequence to look for based on sequences that had previously been deposited in GenBank. But how did the producers of these already deposited sequences know that they had found viral genomes? Welcome to the circular reasoning of modern virology.

To explain the loop that virologists appear to be trapped inside, this 2019 [paper](#) published in Virology is illustrative of the problem:

“Three main methods based on HTS [High-throughput sequencing] are currently used for viral whole-genome sequencing: metagenomic sequencing, target enrichment sequencing and PCR amplicon sequencing, each showing benefits and drawbacks (Houldcroft et al., 2017). In

metagenomic sequencing, total DNA (and/or RNA) from a sample including host but also bacteria, viruses and fungi is extracted and sequenced. It is a simple and cost-effective approach, and it is the only approach not requiring reference sequences. Instead, the other two HTS approaches, target enrichment and amplicon sequencing, both depend on reference information to design baits or primers."

Maurier F, et al, "A complete protocol for whole-genome sequencing of virus from clinical samples," Virology, May 2019.

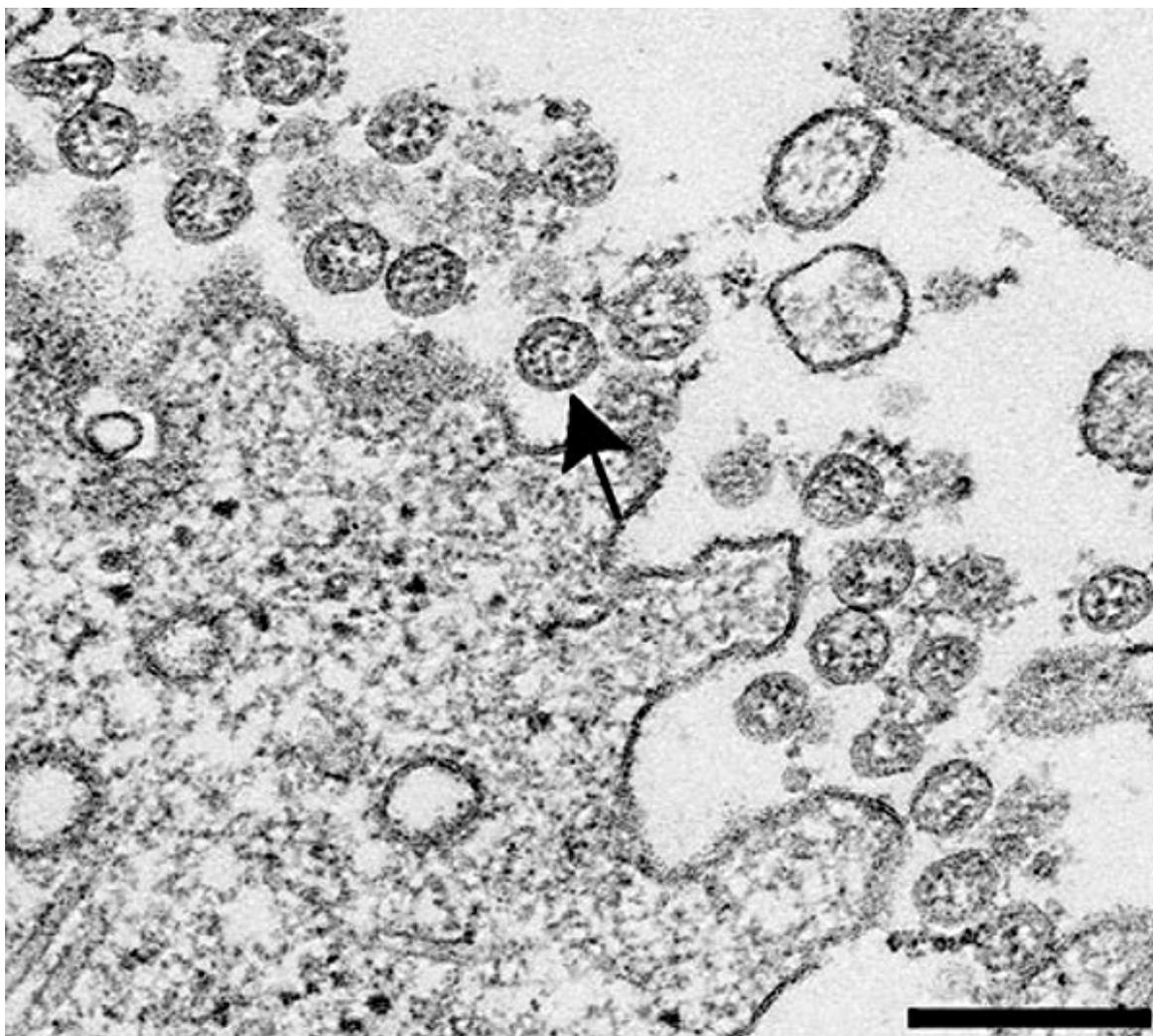
Essentially this gets to the root of the problem. The "viral" reference genomes are being created through metagenomic sequencing but this is done on crude specimens (such as lung washings or unpurified tissue cultures) and then declarations that the selected sequences are viral in origin. So already there are two problems: firstly, there was no step (i.e. purification) to show that the sequences come from inside "viruses" and secondly, as described above, the computer generated "genomes" are simply assembled hypothetical models from small genetic fragments, not something that has been proven to exist in nature as a whole 30,000 base sequence. However, these in silico models then effectively become the "virus" and an entity such as SARS-CoV-2 is created. Once the first of such a sequence is deposited on a database, the "virus" can be "found" by others through the same flawed metagenomic techniques. Or as stated in the Virology paper, it can be "found" through target enrichment and amplicon sequencing (usually PCR), but this requires you to have a reference sequence...that is, a template that was invented in silico by metagenomic sequencing where the provenance of the genetic fragments was unknown.

There is no part in the above process that establishes either:

1) the genetic composition of any imaged or imagined

particles; or

2) the biological nature of such particles, i.e. what they actually do.



It's a good-looking nano-particle alright, but what is it made of and what does it do?

So, now can we return to Hazan's paper to see that it is a pointless exercise in virological nonsense. They state that along with their "SARS-CoV-2 positive control from ATCC", the "patient genomes were compared to the Wuhan-Hu-1 (MN90847.3) SARS-CoV-2 reference genome". Accession number [MN90847.3](https://www.ncbi.nlm.nih.gov/nuccore/MN90847.3) refers to the updated "genome" said to have been found in the 41-year-old man from Wuhan as discussed

above in Fan Wu, et al's paper. The circle is complete – at no stage was it demonstrated that there was any virus by following this evidence trail of “genomes”. Fan Wu's team never found a virus, they simply asserted that their genetic sequence computer simulation was a “new RNA virus strain from the family Coronaviridae” without proving that the sequence existed in nature or came from inside a virus. Hence, there was no “detection of SARS-CoV-2 from patient fecal samples” as the title of the Hazan paper claimed, unless “SARS-CoV-2” means genetic sequences of who-knows-what from who-knows-where. It doesn't matter where or how often these sequences are detected – they have never been proven to be viral in nature. So, when Steve Kirsch stated that Hazan “verified that the sequence of the virus obtained from ATCC matched exactly what she found in people who have the virus,” he is mistaken.

What “virus” is he talking about?

[Connect with Dr. Mark Bailey & Dr. Sam Bailey](#)

cover image credit: [krivitskiy](#) / pixabay

Why Nobody Can Find a Virus

[Why Nobody Can Find a Virus](#)

by [Dr. Sam Bailey & Dr. Mark Bailey](#)

January 5, 2022

Perhaps prior to 2020 the issue of virus isolation was of

minimal interest to the vast majority earth's inhabitants. Most people blindly accept the medical establishment's claims that viruses exist and can cause disease. They otherwise don't give it a second thought. Sometimes you get unwell, and a doctor informs you, "it's probably a viral illness" – but almost every time, you get better again.

However, the increasingly negative impacts from government instigated policies in the name of the "corona" crisis has resulted in some healthy new interest in the subject. Social cohesion in households and communities is being strained, businesses are being run into the ground, and suspicions about the requirement to be injected every four months to maintain protection against an invisible enemy are on the rise. If no virus has been isolated then its very existence is pure speculation. A phantom menace that has no confirmed physical presence, merely a ruinous psychological construct manifesting as a living nightmare. And those who ignore the pivotal issue of virus isolation are blindly accepting a premise on which all manner of lies can be built.

But there are scientific papers that prove isolation?...

The confusion surrounding virus isolation stems from the fact that many published scientific papers state in their titles or claim in their abstracts that they successfully "isolated" a virus. In 2020 and 2021, we lost track of the number of times we were sent such papers as apparent proof of the "SARS-CoV-2" virus. Similarly, industry-funded "fact-checking" sites have a propensity to link to such papers to reassure their spoon-fed readers that the "virus" has been isolated. Unfortunately, such disinformation sites fail to inform their audience that the virologists are not referring to actual physical isolation of any virus and have instead substituted the meaning of the word isolation for something that means almost the opposite.

Researchers such as [Christine Massey](#) have tirelessly collated

Freedom of Information requests from governments around the world to clearly expose the fact that the alleged causal agent of COVID-19 has never once been physically isolated. While at least one [government supported microbiologist](#) has claimed this is disingenuous as the requests are worded in such a way that they are not consistent with the methodology of modern virology, this misses the whole point: the modern virologists are not isolating viruses in the way that the public and probably most of the medical profession are led to believe. Instead, they moved the goalposts.

The excuses for this sleight of hand should be rejected and the isolation of a virus should mean the same as it does with any other entity on the planet – that is, in its pure form, separated out from other material. It is done with things that are smaller than alleged viruses, such as proteins, and things that are bigger such as bacteria. It is not a technological limitation or because of some special property that precludes this process from being essential to the process of real isolation.

The most definitive evidence of a virus would be finding it directly in a host such as a human.

However, despite the fact we are told that a [single sneeze](#) could contain 200 million SARS-CoV-2 particles, when we take a mucous or blood sample from a patient *not one* virus particle can be found. And what about taking samples from hundreds or even thousands of people said to be infected and have a disease such as COVID-19 and then combining them altogether? I'm not sure if this has ever been tried but apparently even then if we purified such a sample, the excuse is apparently the same: we [wouldn't find any viruses in there!](#)

So, we are expected to believe that a patient is overwhelmed with trillions of viral particles but we can't find any on or inside them.

Magic Tricks and the Electron Microscope

The virologists of old were convinced that with the advent of the electron micrograph and more efficient purification techniques they would be able to find all sorts of viruses in sick individuals. However, it became apparent they would have to abandon this process around the middle of the 20th Century as the attempts were fruitless – no viruses were found. These days when most virologists talk about isolating viruses, one of the techniques they cite is tissue culture experiments in test tubes. It has been [outlined](#) why these are not only unsuitable proxies, but the stress of the test tube conditions alone on abnormal cells can produce the effects, no virus required. Similarly, detecting genetic sequences in these culture experiments is also unsatisfactory as there is no proof that such sequences come from inside any of the particles they are calling “SARS-CoV-2” and even if they did, that this is enough to qualify them as viruses. A virus is said to be a particle with a proteinaceous coat surrounding a genome that can infect and parasitise a host and then infect other hosts.

Therefore, anyone asserting that they have isolated a virus needs to show that what they have is actually a virus and not just test-tube observations and various biological molecules that can be detected without any viruses required.

How to Isolate a Virus

STEP 1: Identify a number of individuals with specific symptoms and signs that are thought to be caused by a virus.

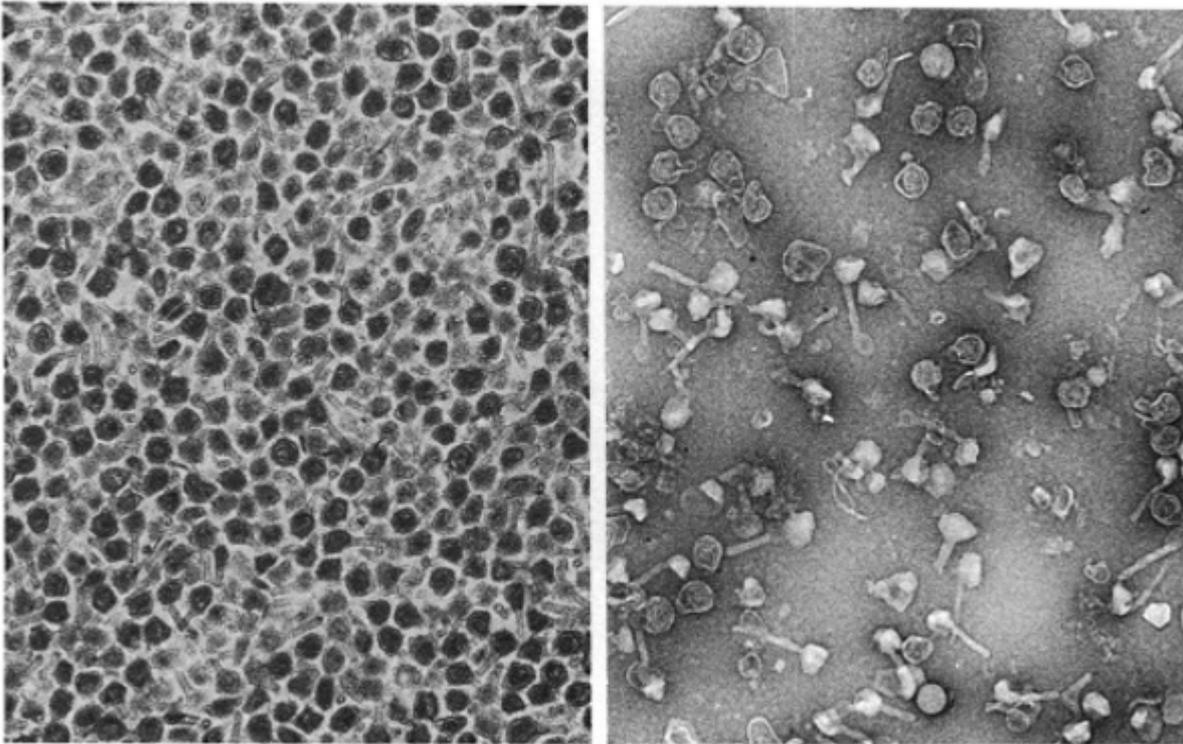
This can't be done with COVID-19 as it is an ethereal clinical disease that is “diagnosed” with a PCR result. There are no specific symptoms, signs or confirmatory investigations. However, for the purposes of this essay we will assume that we are talking about a well-defined clinical disease. We know that the virologists will not be able to find any viruses directly in a patient as outlined

above, which doesn't look good, but we'll let them have another shot.

STEP 2: Perform a tissue culture experiment with a patient sample.

Briefly, this involves adding a crude sample (e.g. sputum) to some cells in a test tube and seeing if it produces any viruses. In early 2020 it was declared that a "virus" called SARS-CoV-2 had been "isolated" with this method. In reality [Na Zhu, et al](#), had both failed to physically isolate any particles or show any of these particles to be viruses.

So, what should have been done? Na Zhu, et al should have repeated their experiment multiple times and then *purified* the particles they called "2019-nCoV" (later "SARS-CoV-2") by means of a technique such as density gradient ultracentrifugation. This technique was already well established in the 20th Century and as illustrated below in Figure 1 could be used satisfactorily to obtain much more purified samples that could be confirmed by electron microscopy.



At this point we could more confidently claim that we had physically isolated *viral-like* particles and could analyse their composition, including their genetic structure. All very interesting (and beyond what has been done) but the proof that these particles are viruses, that is infectious and disease-causing, still needs to be established.

STEP 3: Infect a live animal, eg a monkey with the purified particles.

Mind you, we are not talking about bogus experiments as described in Sam's [SARS-1 video](#).

Pouring large volumes of mixed tissue culture fluid directly into an animal's lungs to see if it will cough or develop some lung tissue changes does not constitute evidence of a virus. Pouring any biological muck into an animal's lungs will cause these reactions. That's why control experiments are suspiciously absent in such experiments. The purified particles, said to be viruses (which we are told are airborne and highly infectious) *alone* could be simply sprayed into the animals'

cages and they should get sick. Following that, any monkey introduced into the cage subsequently should also get sick if there is a contagious pathogen.

The Case for Human Experiments with “Viruses”

In fact, given that the world has been subjected to draconian restrictions, ruinous lockdowns, and population-wide experiments with “vaccines” in the name of an alleged virus, the case can be made for human experiments involving the “virus”. In the tradition of Max von Pettenkofer (who [swallowed cholera bacillus](#) in 1892 to show that it could not cause cholera by itself), we would be happy to inhale any purified particles said to be the SARS-CoV-2 “virus”, like many (we’re sure) who have investigated virology. It’s not particularly bold when one is aware that not once in history have any particles alleged to be viruses *by themselves* been shown to cause disease in any animal. Of course, such experiments would not be considered ethical today because the “deadly virus” was declared to exist, cause disease, and transmit via aerosol even though no such evidence was produced. However, one would suspect that these experiments are avoided due to the long history of the failure to demonstrate human to human transmission of any alleged viral illness.

Perhaps the complete lack of clinical evidence that influenza passes between humans as talked about [below](#) is the most embarrassing chapter for the “highly infectious virus” claimants.

The virus model was suspect long ago but it’s a model that will continue to be peddled as it pays dividends for industry participants – indeed, the development of their playbook over the decades is outlined in [Virus Mania](#).

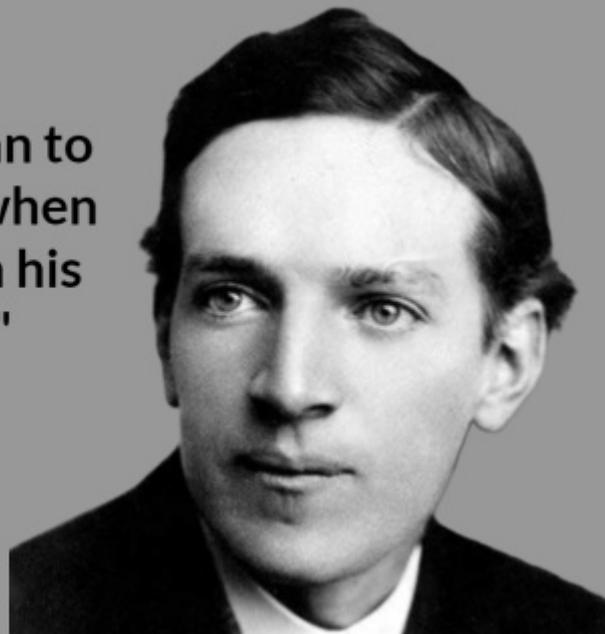
The End of Virology

Forget hypothetical computer generated “genomes” from non-

purified samples and PCR tests that are calibrated to these simulations: none of these require the existence of a virus. Forget electron micrographs of cell “culture” experiments purporting to show viruses: these are simply vesicles of unknown significance until shown otherwise. What we need to see is purification of these particles and then a demonstration that they can parasitise a host and are the *causal* agent of a disease. The reality is that nobody is isolating viruses because carrying out the correct experiments would reveal that the particles are not viruses at all and virology would be finished.

"It is difficult to get a man to understand something when his salary depends upon his not understanding it."

- Upton Sinclair



[Connect with Dr. Sam Bailey & Dr. Mark Bailey](#)

cover image credit: based on creative commons work of [mauriciodonascimento](#)

The Emperor Has No Corona

[The Emperor Has No Corona](#)

by [ThoughtCrimes7](#)

August 11, 2021

Available at ThoughtCrime7 [BitChute](#) and [Odysee](#) channels.

An investigation into the “Isolation” of the SARS-COV2 “virus”.

SOURCES:

Dr. Andrew Kaufman:

<https://andrewkaufmanmd.com/>

SOVI – Statement on Virus Isolation – Add your name:

<https://andrewkaufmanmd.com/sovi/>

Dr. Tom Cowan:

<https://drtomcowan.com/>

Only Poisoned Monkey cells Grew the Virus, article by Dr Tom Cowan:

<https://drtomcowan.com/only-poisoned-monkey-kidney-cells-grew-the-virus/>

Virus Mania, by Dr. Sam Bailey and Torsten Engelbrecht:

<https://www.kobo.com/us/en/ebook/virus-mania-1>

Torsten Engelbrecht:

<https://www.torstenengelbrecht.com/en/virus-mania-in-the-media/>

Isolate the Truth Fund, 1.5 Million Euro Prize:

<https://www.samueleckert.net/isolate-truth-fund/>

Christine Massey, Global FOIA Requests:

<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-around-the-world-have-no-record-of-sars-cov-2-isolation-purification/>

Dr. Stephan Lanka – CPE Produced without Virus:

<https://odysee.com/@CosmicEvent:5/CPE-Control-Experiment-21-April-2021-English-version:0>

Dr. Vincent Racaniello:

<https://microbiology.columbia.edu/faculty-vincent-racaniello>

Detection of 2019 novel coronavirus (2019-nCoV) by real-time RT-PCR

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6988269/>

Severe Acute Respiratory Syndrome Coronavirus 2 from Patient with Coronavirus Disease, United States

https://wwwnc.cdc.gov/eid/article/26/6/20-0516_article

GenBank:

<https://www.ncbi.nlm.nih.gov/genbank/>

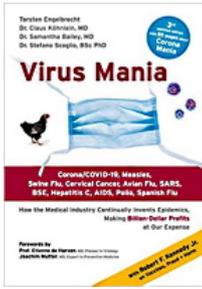
In-Silico PCR:

<http://noncode.org/cgi-bin/hgPcr>

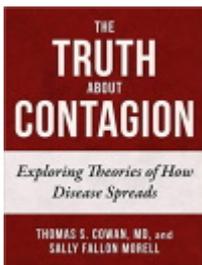
See related:

[**Turning Virology & Modern Medicine on Its Head: Dr. Andrew Kaufman w/ Brian Young**](#)

[**Drs. Tom Cowan, Andy Kaufman & Stefan Lanka: On the Myth That Virology Is Real Science & What We Don't Yet Know About These Highly Toxic Covid "Vaccines"**](#)



[Virus Mania: Corona/COVID-19, Measles, Swine Flu, Cervical Cancer, Avian Flu, SARS, BSE, Hepatitis C, AIDS, Polio, Spanish Flu. How the Medical... Making Billion-Dollar Profits At Our Expense](#) by Torsten Engelbrecht, Claus Köhnlein, Samantha Bailey, Stefano Scoglio



[The Truth About Contagion: Exploring Theories of How Disease Spreads](#) (2021) by Thomas S. Cowan MD and Sally Fallon Morell

cover image credit: [Dieterich01](#) / pixabay