

Coronavirus, Phase Two: Arbitrarily Expand the Definition of the Disease

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As I've described in previous articles, the CDC and WHO deploy several strategies to pump up the number of COVID cases. For example, the diagnostic test, which spits out many, many false-positive results.

After all, the authorities must somehow convince the dumbed-down public that the "epidemic" is alive and spreading.

Next up: we will see new symptoms added to the list of COVID indicators. In 1987, I watched the shameless manufacture of so-called AIDS-related diseases. The CDC definition of AIDS, which I printed in my book, *AIDS INC.*, took up 15 pages. The only non-AIDS-related disease left after the CDC got through was infection by aliens from the Orion Belt.

So here we go again.

[The Washington Post, April 25](#), *"Young and middle-aged people, barely sick with covid-19, are dying from strokes."*

This is a bald attempt to counter the flood of data, from several countries, that indicates the people dying from the purported virus are, overwhelmingly, the elderly, who already have multiple, long-term, serious health conditions, for which they've been treated with toxic drugs. In other words, these

elderly patients aren't dying FROM the purported virus at all.

So according to the Post: "Doctors sound alarm about patients in their 30s and 40s left debilitated or dead. Some didn't even know they were infected."

"...Many doctors expressed worry that as the New York City Fire Department was picking up four times as many people who died at home as normal during the peak of infection that some of the dead had suffered sudden strokes. The truth may never be known because few autopsies were conducted."

"...Jabbour said many cases he has treated have unusual characteristics. Brain clots usually appear in the arteries, which carry blood away from the heart. But in covid-19 patients, he is also seeing them in the veins, which carry blood in the opposite direction and are trickier to treat. Some patients are also developing more than one large clot in their heads, which is highly unusual."

Of course, the Post says nothing about the worthless diagnostic tests on these unusual patients. The article assumes they are "infected with COVID-19."

And the further assumption is, somehow the virus is attacking the heart, or the arteries, or the brain, or the blood.

This sets the stage for expanding the definition of the epidemic disease.

It reminds me a bit of so-called AIDS dementia, a fanciful add-on back in the 1980s. In that instance, a lunatic doctor could tell a patient, "I see you informed the nurse you're feeling better. You're recovering. But you see, the virus is lethal. You only imagine you're getting better. Looks like you have AIDS dementia..."

These days, the public reaction to "unusual cases of stroke among the young," will be: THE VIRUS MUST BE CAUSING IT. WHAT

ELSE COULD IT BE?"

Newsflash: It could be any number of things, none of which is connected to a virus. The medical literature of the past hundred years is filled with reports of patients falling ill and dying in odd ways.

For official propagandists (professional liars), it doesn't matter how many people are now perishing of "unusual strokes." It only matters that reports of their dying can stoke fear and find their way into new sprouting branches of the definitional COVID tree.

Young people, teens, babies, pregnant mothers, exhumed bodies from decades ago—whatever the WHO/CDC need to do, to expand the meaning of COVID, whatever they need to invent, they'll be there with "alarming findings."

Don't fall for it.