Coronavirus: What Real Science Would Look Like, if It Existed

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by Jon Rappoport March 10, 2020

This is one of the most important articles I've written on the current "epidemic." (<u>full archive here</u>)

When you look at the justification for all the lunatic measures being taken to "stem the tide" of the coronavirus, you come to the simplicity of CASES.

How many cases are there? How many people are "infected?"

And the answer to that comes from what?

From tests. From diagnostic tests.

Of course, some people are ridiculously labeled "cases" without tests. I've explained that nonsense in other articles.

Outside of China, the most widely used test is called the PCR. It must be done with tremendous care, because contamination with irrelevant microbes and cellular material can yield a misleading and absurd result.

The PCR, it is claimed, can take a tiny, tiny bit of material from a patient and blow it up many times, so it can be identified. "This is the coronavirus. This patient is infected."

Not only that, the test's proponents assert that, quite

easily, the PCR can also determine the AMOUNT of virus in the patient's body. Why is that vitally important? Because, to even begin talking about the patient ever getting sick, he must have millions and millions of coronavirus actively replicating in his body.

There are people (and I'm one of them) who challenge the claim that the PCR can show how much virus is in the patient's body. The experts try to brush us off—we don't understand the intricacies of the test, it's highly technical, we're not qualified to make a judgment, etc.

I've been searching for a way around this futile argument. In the process, I've discovered something important about the PCR. I SEE NO EVIDENCE THAT THE ACCURACY OF THE TEST HAS EVER BEEN PROVEN.

Let me explain. You bring your car to a good repair shop. The mechanics hook it up to a device and run a test to diagnose what's causing the car to stall. Who says their tests are accurate? At some point in the past, these diagnostic procedures have been vetted, to make sure they work properly.

And sure enough, when the mechanics say, "We've found the problem," and when they correct that problem, you drive the car and it doesn't stall anymore. This is called a real-life result.

This is not the situation re the PCR. Its proponents claim it can count how much virus is in a patient's body—how much of a particular virus. But where is the proof, in real-life terms, that the PCR can do that? How was that proof ever established?

When I say proof, I don't mean technical mumbo-jumbo. I'm not referring to the highly dense language these scientists use among themselves. I'm talking about real live human patients, and results.

After all, if the PCR is being used to diagnose people, and if

the results are being used to count the number of coronavirus cases in various countries, and if the number of cases forms the basis for, say, locking down the whole of Italy in a mass quarantine...THE TEST IS IMPORTANT, WOULDN'T YOU SAY?

I have seen no wide-ranging proof that the PCR was ever checked properly, when it was first introduced, to show it could do what researchers say it can do.

WHO TESTED THE TEST?

I have come up with a process—a simple process—which will check the veracity of the PCR. It should have been carried out decades ago. The fact that it wasn't is an enormous scandal.

Here it is.

From a hundred patients, very small tissue samples are taken. The PCR lab people don't take the samples. They don't ever see the patients or know who they are.

The lab professionals run these hundred samples through the PCR, obtain results, and then report: what virus did they find in each case, and how much of that virus did they find?

Let's say, in six instances, the lab techs claim they found a great amount of virus in the patients.

Well, those patients should be sick.

Are they? ARE THEY?

"We've determined that patients 4, 9, 32, 54, 65, and 86 all have a huge amount of virus in their bodies."

"Interesting. Thanks. Let's see. Hmm. Turns out these people are fit as a fiddle. Not sick. I guess your test didn't work. It's a flop."

Or maybe the test does work. The six patients are sick. LET'S FIND OUT. IN THE WORLD, NOT IN JOURNALS.

That's what I mean by real-life results. No jive, no tap dancing.

There is more. This experiment with the hundred patients? It should be done, not just once, but many times. A hundred patients here at this facility, a hundred patients there at that facility. Thirty or forty different facilities, and thirty or forty different sets of a hundred patients. It should be done by independent scientists without conflicts of interest.

It should have been done decades ago. I see no evidence that it was.

THE TEST WAS NEVER PROPERLY TESTED. A GIANT SCANDAL.

Think about what that means.

Think it through.

Trace all the implications.

For example, imagine you're the political leader of a country, with 100 "reported cases of the coronavirus." Are you going to lock it down? Are you?

Think about everything that's happening now in the world. Use your intelligence.

THINK IT THROUGH.

Don't jump on the fear bandwagon. Don't jump on the "scientific" b.s. bandwagon.

Use your mind.

You're interested in scandals? I've just presented one. It's blaring with a thousand trumpets, right out in the open.