

Covid: The Numbers Game, the Fraud, and the Final Answer

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by [Jon Rappoport](#)

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I want to make a vital distinction that clears up confusion.

When people—for example, medical researchers—are playing a game to further their purpose, and the game is a fraud, you have two ways to go.

You can ENTER THEIR GAME, temporarily, to show how, in their own terms, by their own standards, they are contradicting themselves and committing fraud.

Or you can STAND OUTSIDE THEIR GAME, and show how the very structure and rules and assumptions of the game, to begin with, are riddled with lies.

In this article, I'll do both. And I'll make it clear when I'm INSIDE and when I'm OUTSIDE.

Why bother? Because it clarifies the mind. That's always a good thing. It's especially good during this wall-to-wall criminal event called COVID-19.

And readers deserve to know whether a writer is actually accepting the game the bad guys are playing; or whether he's just momentarily dipping into the game, in order to reveal its absurdities.

OK, here we go. Let's look at CASE NUMBERS.

Now, I'm inside their game. I'm assuming, as they do, that a case of COVID-19 is real. It means something. It denotes disease, infection, as a result of a virus. Ditto for a case of the flu, or what is called ILI, influenza-like illness. These cases are also real, they denote infection and illness as a result of a virus.

Start with Europe and just plain seasonal flu. Not COVID. According to the World Health Organization (WHO) Europe, "During the winter months, influenza may infect up to 20% of the population..."

The population of Europe is 741 million people. This works out to 148 million cases of ordinary flu. Not once. Every year. EVERY YEAR.

As of May 2, 2020, the number of COVID cases in Europe is 1,361,853, according to the European Centre for Disease Prevention and Control. Suppose we multiply that number by 2, or 4, or 20, to arrive a yearly figure for COVID cases in Europe. Does it approach, even vaguely, 148 million cases of flu—year after year after year?

According to the European Centre, the number of COVID cases in Italy is 209,328.

According to sciencedirect.com, "In the winter seasons from 2013/14 to 2016/17, an estimated average of 5,290,000 ILI [influenza-like illness] cases occurred in Italy, corresponding to an incidence of 9%." That's 5 million plus each year. Not just once.

Multiply the number of COVID cases in Italy by whatever number you choose, and see what it takes to arrive at the flu-case level for a year. Year after year.

Finally, let's look at figures for ordinary flu, for the whole planet. A study published in the journal, Pharmacy and Therapeutics, states, "Influenza is a highly contagious

respiratory illness that is responsible for significant morbidity and mortality. Approximately 9% of the world's population is affected annually, with up to 1 billion infections, 3 to 5 million severe cases, and 300,000 to 500,000 deaths each year."

However, WHO Europe pegs the death figure higher: "A recent study found that worldwide up to 650,000 people die of respiratory diseases linked to seasonal influenza each year..."

Right now, the COVID global death toll stands at 245,000. For roughly half a year. So, for 2020, COVID could approach the number of seasonal flu deaths. What about the next 10 or 20 years? Flu deaths are astronomically high every year.

All in all, on what basis—comparing seasonal flu and COVID—do we now have a COVID planetary lockdown, versus no lockdowns for seasonal flu at any time? It makes no sense.

Given the long-term track record of the flu, and the official response, meaning no lockdowns, it makes absolutely zero sense to have a lockdown now. The official numbers don't support it.

Given the game of official case numbers, and accepting those numbers—for example, one BILLION flu infections year after year—the refusal to administer widespread lockdowns for flu MEANS there should be no COVID lockdown now.

The numbers game traps and contradicts and implicates itself. It yields up: NO LOCKDOWN NOW.

But there IS a lockdown now.

All right. Let me step outside the numbers game. I'll take up a position far enough away to analyze its basis.

And I'll simply say: ALL COVID-19 case numbers are meaningless.

Why?

ONE: Researchers never properly discovered a new virus in China in the first place. Their claim of having done so is false.

TWO: The widespread diagnostic test for the virus in a patient, the PCR, is riddled with irreparable flaws. It spits out false-positives, because the test reacts to the presence of irrelevant germs that have nothing to do with a purported COVID. Most importantly the test has never been vetted, in the real world, for its claimed ability to detect whether a patient is ill or is going to become ill.

THREE: Many diagnoses of COVID in patients are based on no tests at all, but rather eyeball assessment, guesswork, unproven assumptions, outright lying, or, in China, CT scans of the lungs, which prove nothing about the presence of COVID or any other supposedly causative virus.

To explore the particulars of my reasons ONE and TWO, you need to read my prior articles on the fake COVID pandemic. The link to my COVID articles is below. In particular, I suggest reading, *"Two vital experiments that have never been done,"* for my refutation of both the discovery of a new virus and the validity of the PCR test. (link also below)

Therefore, again, ALL case numbers of COVID are meaningless.

Likewise, all seasonal flu or flu-like numbers are meaningless. As just one illustration of this fact, I have published, many times, Peter Doshi's shocking investigation of US flu deaths. Doshi reported in the online BMJ, on December 10, 2005, "...CDC claims 36,000 Americans annually die from flu...Meanwhile, according to the CDC's National Center for Health Statistics (NCHS), "influenza and pneumonia" took 62,034 lives in 2001-61 777 of which were attributed to pneumonia and 257 to flu, and in only 18 cases was flu virus positively identified..."

After both stepping outside the numbers game, and momentarily

stepping into it, what are we left with? We know that people have been falling ill, for a long, long time, with respiratory problems of various kinds. The human race has survived, without a lockdown on the scale we have now, and without the deaths caused by economic devastation. If you wanted to enable general immunity (aka health), regardless of how you define and describe it, you would now promote people being in close contact with one another. If you wanted to postpone immunity/health, you would lock people up and separate them.

As for the true causes of illness and disease, I have commented on that subject in other places. It's not the purpose of this article. I will say this: In modern times, we must never ignore poisonous vaccination campaigns; other toxic medical treatments, including many drugs; the insults delivered by pesticides, GMOs, industrial pollutants, and electromagnetic technologies; and the promotion of fear. Germ theory is not king. It never was.

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