

'Tis the Season to be Tested?

['Tis the Season to be Tested?](#)

I couldn't resist writing one more article before the holidays – on rapid testing. The field is just too rich with uh, manure, to leave it unploughed.

by [Rosemary Frei, MSc](#)

December 23, 2021

Officials in many jurisdictions are reporting [skyrocketing case rates](#), stoking ever greater fear of the Mighty Omicron.

Yet the breathless, wall-to-wall, MSM coverage doesn't mention that **the jump in cases is very likely simply due to the testing rate shooting through the roof.**

Instead the MSM is having a field day, thanks to most people's gullibility. **And that includes promoting mass testing, early and often.**

The media [report](#) that new studies are showing people infected with Omicron are [far less likely](#) to have severe disease or to be hospitalized than those detected to have Delta, and also [usually are vaxxed or had Covid](#).

Yet media quote researchers, politicians and public-health officials as warning that the high Omicron case numbers suggest health-care-system capacity could soon be pushed past the limit.

I should make special mention of Neal Ferguson's outstanding lifetime performance in stretching plausibility. (He's [long overdue](#) for an Academy Award for making stuff up; if they create a science and medicine category he'd be among the front-runners.)

Ferguson and his colleagues at the Imperial College of London posted a study [Dec. 22](#) stating that Omicron is associated with a 20%-25% lower overall hospitalization risk and 40%-45% less chance of being hospitalized for more than one day. They conclude that, “[O]ur estimates suggest that individuals who have received at least 2 vaccine doses remain substantially protected against hospitalisation, even if protection against infection has been largely lost against the Omicron variant.”

And yet, true to form, Ferguson was quoted in a [Dec. 22 Guardian](#) article as saying that, “Given the high transmissibility of the Omicron virus, **there remains the potential for health services to face increasing demand if Omicron cases continue to grow at the rate that has been seen in recent weeks.**” (Bolding added by me.)

So it’s no surprise that many prominent people have jumped onto the ‘test early and often’ bandwagon.

For example, US president Joe Biden is pledging the delivery of [half a billion free at-home test kits](#) starting in a few weeks.

And people have been lining up for hours to pick up at-home tests in thousands of cities across the planet.

A typical example of ‘experts’ inciting that rapid-testing rush is a [Dec. 20/21](#) article by *Toronto Star* reporter Ben Cohen. (It’s [reposted here](#), paywall-less.)

Here’s part of the article:

“‘With a rapid test, a positive is a positive,’ said Dr. Eric Arts, a virologist and immunology professor at Western University [in London, Ontario]. ‘A negative is not a definitive negative. You may still be infected, regardless of what the rapid test shows you.’”

“‘The Omicron variant has evolved to escape our immune system,

and to some extent escape the vaccine,' Arts said. 'You have to be cautious. The exposure risk is very high right now. When we hear about there being more than 3,000 (COVID-19) cases in Ontario right now, it's probably triple that, if not more.'

"Arts said those with access to rapid tests shouldn't stop taking them after a negative result if they are still going out around other people and particularly if they are feeling ill – in which case they should stay home regardless.

"'You need to continue to take rapid tests if you're going into crowded places and high-risk situations like shopping malls,' said Arts. 'You should repeat that rapid test the next day and the next day, especially if you have symptoms.'"

I emailed [Arts](#) two evenings ago and asked him for the studies that back up his statements about the accuracy of rapid tests.

(I didn't ask him how he determined Omicron has the capacity to escape the vaccines. That's because I've written many articles, most recently on [Dec. 8](#), about how that's an extremely unlikely event, despite its being promoted as being very likely by 'experts' on both sides of the Covid divide.)

Arts didn't respond. So yesterday morning I called his office number. His voicemail box was full.

I quickly looked for Western University's media relations person who deals with Arts's department, and found it's [Jeff Renauld](#). I texted Renauld and asked him to put me in touch with Arts.

Renauld responded by text that, "He's actually on leave until the new year. So he's not readily available for all interviews." Renauld didn't explain why Arts was available to Ben Cohen of the *Toronto Star* but not to me.

I persisted. And Renauld relented, texting me, "OK. What's your question? I can try texting him but again, he's

technically on study leave and not replying to all requests.”

I asked him to ask Arts to respond to my email.

I hadn't heard back from either of them by this morning. So I texted Renauld just before 11 asking if he'd connected with Arts. Renauld replied: “I was unable to reach him. Sorry.”

Perhaps Arts didn't respond because I'm not from the mainstream media.

Or maybe he didn't get back to me because, as far as I can determine, there are very few – if any – studies that support his assertions, and he knows it. And/or because, as I discovered this evening, he also has a hidden conflict of interest. (See below.)

Here's one indication that Arts is straying from the truth. In his quotes in the *Toronto Star* article he only mentions true-positive and potentially false-negative test results. He doesn't say a single word about false positives or true negatives – even though by definition they [always occur with any test](#).

It just doesn't add up.

After all, even the manufacturers of the large number of rapid tests being [approved](#) make such statements as admitting that their tests' “**clinical performance has not been established for asymptomatic serial testing.**” (And of course it's unwise to trust the [manufacturers' lofty claims](#) about their own tests' accuracy.)

Here's yet another indication that Arts's assertions are on shaky ground. Health Canada states that positive results from rapid tests are merely '[presumptive positives](#)'; they are considered conclusive only after being confirmed by a PCR test yields a positive result. And PCR tests in fact are very inaccurate – so if Health Canada is saying PCR is more

accurate than rapid tests, rapid tests truly are highly inaccurate.

Not only that. Health Canada's guideline on rapid tests (written by a [committee comprised largely of](#) boosters of the Official Narrative about Covid's contagiousness and capacity for immune escape such as Irfan Dhalla, Isaac Bogoch and Kieran Moore) states that **rapid tests have 'excellent specificity.'** Specificity refers to proportion of negative tests that are truly negative (i.e., 'excellent specificity' means almost all the negative test results are true negatives).

Remember that, in contrast, Arts was quoted in Ben Cohen's article as saying: "A negative is not a definitive negative. You may still be infected, regardless of what the rapid test shows you."

I just did a quick [search for Arts's name in PubMed](#), the repository of published science and medicine papers.

It turns out that a paper co-authored by Arts was posted [Dec. 16](#). It's on a [vaccine against Covid](#) based on a VSV (vesicular stomatitis virus) carrying the gene for the novel coronavirus's spike protein.

In that paper, Arts and his co-authors claim that immune escape will make at least some of the currently used Covid vaccines ineffective. "Thus, SARS-CoV-2 vaccine development and testing must continue, and inexpensive viral vector-based vaccines, such as the rVSV-SARS-CoV-2 described herein, may be critical for future pandemic control," they write. They conclude that, "**We believe our research has proven that [our vaccine] is a great candidate vaccine, not only for use as a prime and boost vaccination for unvaccinated individuals, but also as a potential boost vaccine following previous vaccination with other COVID-19 vaccines.**" (Bolding added by me.)

So it appears that Arts has an undisclosed conflict of interest when he talks to media about Omicron and immune escape.

Yup, always [follow the money](#).

These days it's more important than ever to be sceptical of statements from 'experts' – particularly when they contradict themselves and/or each other.

I'm hoping they've finally stretched more people's credulity to the breaking point.

After all, we could all use a break.

So enjoy your holiday!

And here's to a New Year in which we get more and more breaks.

Let's hope fewer and fewer people accept manure at face value, especially when it's spread so thickly. Instead let's all plow and dig for the truth.

[Connect with Rosemary Frei, MSc](#)

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