## Why I've Come to Suspect That Covid-19 Doesn't Even Exist

Why I've Come to Suspect That Covid-19 Doesn't Even Exist

by <u>Richie Allen</u> March 22, 2021

Until recently I believed that I may have had covid-19. Shortly after Christmas 2019 I became very ill. I spent the first three weeks of January 2020 in bed. I thought I was a goner. My GP was bewildered. He knew my lungs weren't getting oxygen, but hadn't a clue as to why.

There was no mucus on my chest and no fluid on my lungs, but I was turning blue. Steroids made little difference. Sitting up in bed alongside Caroline one night when it was really bad, I told her I was sorry and to take care of herself.

I came out of it. I still don't know how. There's a video of me on The Richie Allen Show Facebook page. I recorded it to explain my absence. I can't watch it. I look like a corpse. I dropped nearly a stone and a half (20 lbs) and haven't managed to put it back on.

Then Covid. Then lockdown. I wondered. Maybe I had it. I eventually satisfied myself that I must have had it. What else could it have been? I've had pneumonia in my lifetime and some very severe chest infections. Antibiotics and physiotherapy got me out of those jams.

This felt different. It wasn't worse than pneumonia, it just felt like there was nothing that could relieve it. Like I said, fortunately I pulled through. I never smoked and I am very fit. I put it down to that.

Now though, I am not so sure that I had covid-19 or that it even exists. I'm saying I am not sure. I'm no expert. There's a reason they call these opinion pieces.

The thing that bugs me most is the disappearance of the flu. I can't get my head round that one. Governments all over the world have told the same story this Winter. Flu has been eradicated.

Public Health England (PHE) announced last month that not a single case of flu had been found in the UK in January/February 2021. PHE analyses thousands of swab samples every week for the prevalence of different respiratory viruses in the population.

685,243 samples were analysed over a seven week period from the second week in January. Guess what? There wasn't a single case of the flu, or so they claimed. I don't believe them. Asked to account for that, they said it was down to coronavirus restrictions.

I don't believe that either. That's a little too convenient. Flu has been eradicated because we worked from home, socially distanced and wore masks? No way. If they'd claimed to have found 500 flu cases, or 1000, I might have believed them. They found none. Something is up. Maybe flu is being diagnosed as covid-19. Maybe.

Writing in The Daily Mail today, NHS Consultant Pathologist Dr. John Lee challenged the UK's covid death count. Lee writes:

"Some point to the Covid death toll, now over 125,000 in Britain, which is almost double the number of British civilians who died in the Second World War.

But we should remember that this represents two winter peaks

(a time of year when it is not unusual for tens of thousands of Britons to die from respiratory diseases).

And that some of the total is due to the manner in which we record Covid deaths: there is a big difference between dying directly from Covid, and dying after testing positive for Covid within the last 28 days, where other illnesses may well be responsible.

Notably, we have never recorded respiratory deaths this way before."

I've highlighted the points germane to my argument. Respiratory illnesses carry off thousands of our most vulnerable each and every Winter. But we are told that the only respiratory killer in town at the moment is coronavirus. That's surely impossible?

Why did the government and Public Health England adopt a brand new method for recording covid deaths? As Lee says, there's a very important distinction between dying of something and dying four weeks after testing positive for something. It's tantamount to anti-science.

I've eliminated all the obvious possibilities as to the reason for making such a change in the method of recording deaths. I have concluded that the change was made to drive up the numbers. There can be no other explanation. It's classic Occam's razor.

Now why would anyone want to make it look like far more people are dying from an illness than actually are? There aren't too many possibilities here. Someone is working to an agenda.

Maybe that agenda is to convince the public that they are in the midst of a deadly pandemic and therefore must accept radical changes to their lives, sacrifice their livelihoods and take experimental medicines? Sound far fetched? I would have thought so once upon a time. Throughout most of 2020, people were diagnosed as having coronavirus, after having a PCR test. The test is redundant. The man who invented it, Dr. Kary B. Mullis, said it wasn't made to detect any type of infectious disease.

A Portuguese Court ruled late last year that the PCR test is "unable to determine, beyond reasonable doubt, that a positive result corresponds to the infection of a person by the SARScov-2 virus." The UK media ignored this.

Has SARS-cov-2 been isolated then? Does it even exist? Is the PCR test picking up fragments of other viruses in people, which testers are then labelling covid-19? The answer is yes and remember, this has been happening since day one.

I don't know for sure that covid-19 doesn't exist, but weighing up everything I know now, I must concede that it is a possibility. The question is, does it matter at this point?

Millions have already had the experimental "vaccines." The damage done to children is immeasurable. The totalitarian tiptoe has become the totalitarian stampede. Vaccine passports are here. Social crediting is on the horizon. It hardly matters now, whether covid-19 is real or just the flu rebranded.

**Connect with Richie Allen**