

Why Nobody “Had, Caught or Got” COVID-19

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by [Dr. Mark Bailey](#)

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Recently I spoke to an international consortium of doctors and researchers about the COVID-19 situation and the issue of virus existence. I was asked whether I thought COVID-19 cases were fictional in nature, which is an interesting question. It goes beyond the matter of whether pathogenic viruses exist and are the cause of disease. It also allows us to address the frequent claim people make that whatever COVID-19 is supposed to be, they “got it,” based on their experience or one of the so-called tests they took. Let’s examine why there is no “it” even though there are lots of “cases”...

When most people hear the word “case” in a medical context

there is a natural tendency to think that the individual being counted has an actual disease. It may come as a surprise that this is not a requirement at all because in the field of epidemiology it can be [defined](#) as simply, “the standard criteria for categorizing an individual as a case.” ‘Standard criteria’ can be anything and this opens the door to all sorts of misuse and misinterpretation. In fact, it has been used to propagate outright fraud, as Dr John Bevan-Smith and I documented last year in “[The COVID-19 Fraud & War on Humanity](#).”

In 2020, Sam published a video “[What is a COVID-19 case?](#),” which succinctly outlined the problems of the World Health Organisation’s COVID-19 ‘case’ definition. It is evident that the cases are “confirmed” by *in vitro* (outside the body) molecular detection assays – in 2020 that was mostly PCR kits and today we also have the widely-deployed Rapid Antigen Tests, which I have discussed in another [article](#). Whatever tests are being used, they have been completely disconnected from the concept of disease. By mid-2020, it was more than apparent that COVID-19 was not a clinically defined condition. A Cochrane review published in July that year [concluded](#) that, “based on currently available data, neither absence nor presence of signs or symptoms are accurate enough to rule in or rule out disease.” In other words, COVID-19 cases can be solely determined by molecular “tests” such as the above-mentioned ones.

It is astounding that the vast majority of the medical community went along with this nonsense, including many of those who have been opposed to the “pandemic” responses. What does it mean to diagnose or treat a “case” of COVID-19? Even some PCR critics have been gaslit by debates about the “accuracy” of the PCR and appropriate cycle threshold limits in determining ‘cases’. However, this falls back into the same trap, being the belief that these particular tests are capable of telling them something useful about the condition of a

person. They think the PCR just needs to be tweaked in a certain way so it can be used as a diagnostic tool. For clarity, I am not talking about clinically-validated molecular assays with known diagnostic specificity and sensitivity such as urine pregnancy tests. Sam has covered the pertinent differences in her video "[COVID-19: Behind The PCR Curtain.](#)"

Beyond the medical community, the public have been deceived by linguistic legerdemain where the PCR or Rapid Antigen Test results are then called, "cases of the virus," or, "cases of infection," by public institutions and the corporate media. This is a game of deception because the WHO's own definition of a case has been completely misrepresented. If they were honest they would say, "cases of a detected chemical reaction in an assay." However, this would have failed in the marketing department and nobody would have bought into the pandemic narrative in 2020.

In summary, there are indeed cases of COVID-19 but the case definition has been disconnected from the concept of disease. The Johns Hopkins "[COVID-19 Dashboard](#)" displays hundreds of millions of meaningless cases, which look impressive to the uninitiated viewer. However, knowledge of how these numbers have been produced brings an understanding that we have just witnessed a pseudo-pandemic, or what *Virus Mania's* Dr Claus Köhnlein christened a "[PCR Pandemic](#)" in 2020.

The COVID-19 fraud and the concept of "cases" is illustrative of a wider problem concerning medical training and practice within the allopathic paradigm. It is one that I am acutely aware of, having been in the conventional medical system for two decades until my exit in 2016. The paradigm is based on claimed disease *entities*, many of which are allegedly caused by one "pathogen" and are supposedly treated with one "magic bullet." Medicine was subverted in this way last century after the stifling implementation of the Rockefeller-backed Flexner Report (1910) and has never recovered. Dr Montague Levenson

pointed out an example of this misguided thinking about disease around the same time:

“You here assume smallpox to be a thing, an entity. This blunder is committed by nearly all the followers of the self-styled “regular school”, and it will probably be a new idea to you to be told that neither smallpox nor any other disease is an entity, but is a condition.”

Dr. Montague Leverson, Bridgeport Evening Farmer, Connecticut USA, August 21, 1909

One of the worst things that can happen when visiting an allopathic doctor is being labelled with a disease entity. Medical practice has deteriorated into protocol-driven paradigms in which the practitioners blindly follow pathways and tick boxes. Hapless patients are given a tag and then subjected to prescribed “treatments” rather than being advised on how to help cure their body’s real problems. One silver lining to the COVID fiasco is that it blatantly exposed the nature of the medical system to many people and they could see that it cannot help them with achieving true health.

New Zealand’s [Dr Ulric Williams](#) (1890-1971) was another who understood the follies of attempting to classify disease “cases” through not only investigations but also through criteria involving symptoms and signs. Rather, he identified these patterns as *healing crises* and the body’s attempts to restore itself to health. On that note, we are pleased to announce that we will soon be publishing a book that will once again make Dr Williams’ wisdom and curative methods available to the world.

We are frequently asked about what really makes people ill if it is not “viruses” or other disease entities. It is a matter of changing our way of thinking from the misleading model of getting or suffering from “it” to a new understanding of what our body is trying to do to get well again. As well as

addressing this in our free content, we explore these concepts further in our monthly [Q&A sessions](#). Access to this bonus content is available through Dr Sam's [Community Membership](#). Please sign up for this membership if you would like to support our work and have even more of your questions answered. You can also sign up for Dr Sam's free newsletter so you don't miss out on any of the latest developments.

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