

World Doctors Alliance: Open Letter to the UK Government, Governments of the World and the Citizens of the World

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by [World Doctors Alliance](#)

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General public as well as medical professionals are welcome to sign.

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INTRODUCTION

We were told initially that the premise for lockdown was to 'flatten the curve' and therefore protect the NHS from being

overwhelmed.

It is clear that at no point was the National Health Service (NHS) in any danger of being overwhelmed, and since May 2020 covid wards have been largely empty; and crucially the death toll from covid has remained extremely low.

We now have hundreds of thousands of so-called 'cases', 'infections' and 'positive tests' but hardly any sick people. Recall that four fifths (80%) of 'infections' are asymptomatic (1) Covid wards have been by and large empty throughout June, July, August and September 2020. Most importantly covid deaths are at an all-time low. It is clear that these 'cases' are in fact not 'cases' but rather they are normal healthy people.

So-called asymptomatic cases have never in the history of respiratory disease been the driver for spread of infection. Rather it is symptomatic people who spread respiratory infections – not asymptomatic people.(2)

It is also abundantly clear that the 'pandemic' is basically over and has been since June 2020. (3)

We have very highly likely reached herd immunity and therefore have no need for a vaccine.

We have safe and very effective treatments and preventative treatments for covid, we therefore call for an immediate end to all lockdown measures, social distancing, mask wearing, testing of healthy individuals, track and trace, immunity passports, the vaccination program and so on.

There has been a catalogue of unscientific, non-sensical policies enacted which infringe our inalienable rights, such as – freedom of movement, freedom of speech and freedom of assembly. These draconian totalitarian measures must never be repeated.

LOCKDOWN

- Covid has proved less deadly than previous influenza seasons – There were 50,100 flu deaths from December 2017 to March 2018 in England and Wales. There were 80,000 flu deaths in 1969. To date we have circa 42,000 covid related deaths in the UK.
- We have never locked down society for a respiratory virus before.
- The basis for lockdown was a mathematical model by Professor Neil Ferguson. His modelling which predicted half a million deaths in the UK has been roundly condemned as being not fit for purpose. His estimated death figures were clearly wrong by a factor of 10 or 12 times. (1)
- Professor Ferguson's modelling was not even peer reviewed before being acted upon by several nations. Eminent epidemiologists such as Professor Gupta from Oxford University were ignored, they estimated the death count would be far lower in the UK.
- Professor Ferguson has a long track record of woeful modelling he was entirely wrong about sars, mers, mad cow's disease (CJD), and swine flu. Why did the world listen to him again? (2)
- Countries which did not lock down Sweden, Japan, Taiwan, South Korea and Belarus have all done significantly better than us in terms of percentage of population deaths. They also have herd immunity and intact economies.
- Lockdown did not save lives, and this has been published in the Lancet '...in our analysis, full lockdowns and wide-spread COVID-19 testing were **not** associated with reductions in the number of critical cases or overall mortality.' (3)
- The vast majority of deaths occurred in elderly and very elderly people
- The vast majority of deaths occurred in people with pre-

- existing serious health issues such as cancer, cardiovascular disease, Alzheimer's, diabetes etc
- Covid poses virtually zero risk to the under 45's who have more chance of being struck by lightning than dying from covid.
 - Covid poses a very small risk for healthy under 60 year olds who have a greater chance of accidental drowning than dying from covid.
 - The entire nation was essentially placed under house arrest. We have never isolated the healthy before.
 - Isolating the sick and those who are immunocompromised makes sense. Isolating the healthy has hampered the establishment of herd immunity and makes no sense.
 - To put it into perspective we had 115,000 smoking related deaths in the UK in 2015 compared to the 42,000 deaths from covid.
 - We usually have around 600,000 deaths every year in the UK, roughly 1600 deaths per day.

COLLATERAL DAMAGE THE CURE IS WORSE THAN THE VIRUS

- Placing the public under virtual house arrest has caused untold damage to both physical and mental health.(1)
- Ventilating patients instead of oxygenating patients proved to be a deadly policy and an unwarranted failure. Ventilation resulted in many unnecessary deaths. (2)
- Sending infected people from hospitals to care homes placed the elderly and frail under unnecessary risk and resulted in many unnecessary deaths. (3)
- Blanket Do Not Resuscitate (DNR) orders were imposed on thousands of people without their consent nor the consent of their families – this is both unlawful and immoral and lead to unnecessary deaths in care homes. (4)
- Hospitals became essentially 'covid only' centres vast numbers of patients were wilfully neglected, resulting in many thousands of unnecessary deaths. (5)

- The government's own report estimates that some two hundred thousand (200,000) people will die as a direct result of lockdown – not the virus. Hospitals being closed, suicide and poverty will result in more deaths than the virus. (6)
- The cure is worse than the disease!

DEATH CERTIFICATES (1)

- The majority of people who died had significant comorbidities, such as Alzheimer's, cancer, cardiovascular disease and diabetes.
- Counting death certificates with a 'mention' of covid as being a death caused by covid is a gross misrepresentation of the facts and has vastly over exaggerated the death toll.
- The rules for the signing of death certificates have been changed solely for covid by the Coronavirus 2020 Act.
- Doctors do not even need to have physically seen the patient in order to sign death certificates.
- The Act has removed the need for a confirmatory medical certificate for cremations.
- Autopsies have virtually been banned, no doubt leading to misdiagnosis of the true cause of deaths; and also reducing our understanding of the disease itself.
- Worse still, care home staff who largely have no medical training are able to give a statement as to the cause of death.
- Covid was put on death certificates merely on the 'suspicion' of people having covid. This may well be unlawful, since it is a crime to falsify death certificates.
- People who die within 28 days of a positive pcr test are deemed to have died from covid, even if they die in a car crash or from a heart attack; clearly over inflating the death toll (2)

ECONOMIC RUIN

- Reports now estimate that as many as six and a half million (6,500,000) people in the UK will lose their jobs as a result of lockdown. (1)
- It is well known that poverty directly adversely affects health, we can expect to see many people suffering with poor health and resulting in many premature deaths, as a direct result of lockdown.

CENSORSHIP

- Government have acted maliciously in censoring doctors, nurses and NHS staff. The people have the perfect right to hear what is going on in hospitals, and the medical profession have a duty to look after the public and to reassure them. (1)
- The medical profession have not been allowed to let the public know that covid wards have been empty for months, nor that covid deaths have reached an all-time low for months, and this has unnecessarily added to the public's distress and anxiety.
- Doctors and scientists with views that differ from the government narrative have had their videos and articles removed from the internet

TESTING – FALSE POSITIVES

- PCR tests cannot be verified for accuracy as there is no 'gold standard' against which to check them. The virus has not been purified. (1)
- PCR tests cannot detect viral loads and are prone to false positives. (2)
- A positive PCR test does not mean that an individual is infected nor infective. (3)
- In fact approximately 90% of the PCR positive 'cases' are false positives. We therefore have no second wave and no pandemic. (4 , 5)
- The government's report estimates a false positive rate

of between 0.8 to 4.0 % using data from other viral infections – not from covid (6)

- Viral fragments may remain in people's bodies for several weeks following recovery from infection. (7)
- The crisis will never end if we are waiting for zero positive tests. Everyone has probably had a cold caused by a coronavirus and will likely have a few viral fragments matching those of the cousin SARS-CoV-2 virus (8)
- Testing healthy asymptomatic individuals is non-sensical, unscientific and a colossal waste of money. The governments moon shot daily testing program will cost £100 Billion roughly two thirds of the annual NHS budget.
- Antibody testing is not the gold standard as many people have T-cell immunity, and antibodies may not circulate following recovery from infection.

HYDROXYCHLOROQUINE

- The controversial drug Hydroxychloroquine (HCQ) has been unfairly smeared, by the WHO, CDC, NIH and the media.
- However HCQ has very firm support from, amongst others: Professor Harvey Risch epidemiologist from Yale, The American Association of Physicians and Surgeons (AAPS), American Frontline Doctors, the Henry Ford Health System and Professor Didier Raoult microbiologist and infectious disease specialist – to name but a few. (1)
- The Lancet was even forced to retract a study on HCQ after it was revealed by the Guardian newspaper that they had been completely fabricated and written by a sci-fi writer and a porn star. Even following this astounding revelation HCQ was still banned in most countries. (2)
- HCQ according to AAPS has a ninety per cent (90%) cure rate when given early and alongside zinc (3)
- HCQ is safer than many over the counter drugs such as

aspirin, Benadryl and Tylenol.

- The AAPS also point out that there has never been a vaccine as safe as HCQ. (4)
- HCQ has been licensed for over sixty years and has been safely used by billions of people worldwide. There is a very small risk of arrhythmia which is easily monitored.
- Why was HCQ banned then? Could it be that there are no huge profits to be made from this out-of-patent drug?
- HCQ was used to great effect in the Sars1 outbreak of 2005 (5)
- In short had HCQ been available then there would not have been a pandemic !

PREVENTION

- Preventative measures such as hydroxychloroquine or vitamins D, C and zinc should have been recommended for the public. (1)
- Early calcifediol (25-hydroxyvitamin D) treatment to hospitalized COVID-19 patients significantly reduced intensive care unit admissions (2)
- Vit D reduces the severity of covid. (2,3)
- Voluntary isolation of the frail – should they so choose; in combination with preventative measures would have been a far better strategy. The rest of society could and should have continued as normal.

VACCINE

- A rushed vaccine is clearly not in the public's best interest
- Indemnifying vaccine manufacturers against all liability is also clearly not in the public's best interest

CONFLICTS OF INTEREST

- Chief Scientific Officer Sir Patrick Vallance has £600,000 worth of shares in GSK Glaxo Smith Klein. He has in recent years sold £5 million of shares in GSK

which he 'earned' whilst chief of GSK (1)

- Sir Chris Whitty, Chief Medical Officer UK, accepted over £30 million in funding from the Bill and Melinda Gates foundation to study malaria vaccines. (2)
- It has become clear that members of SAGE, Public Health England (PHE), World Health Organisation (WHO), Centre for Disease Control (CDC), National institute for Health (NIH) etc have many conflicts of interests. They all accept very large 'donations' from the pharmaceutical and vaccine industry. These conflicts of interests may well have effectively corrupted their integrity. (3)
- It is also clear that governments are heavily lobbied by the pharmaceutical industry and the vaccine industry, again this may have compromised their integrity. (4)

CUI BONO? WHO BENEFITS?

- Vaccine manufacturers will make trillions from this, as will track and trace manufacturers, and the pharmaceutical industry stand to make trillions from covid testing.
- Prime minister Boris Johnson announced the new 'moon shot' testing will cost £100 Billion, approximately two thirds of the annual NHS budget.
- Surely these vast sums would be far better spent on treating all of the neglected patients who have been wilfully neglected during lockdown and who now face huge waiting lists.

CONCLUSIONS

We have effective and safe treatments and preventative medications for covid, therefore there is no need for any lockdown restrictions and associated measures. The pandemic is essentially over as can be seen by the consistent low death rate and hospital admissions over the past four months.

We demand the immediate and permanent ceasing of all lockdown measures.

Lockdowns do not save lives, that is why they have never been used before. Civil liberties and fundamental freedoms have been unnecessarily removed from the public and this must never happen again.

Preventative measures such as Hydroxychloroquine, vitamin C, Vitamin D and zinc must be made readily available to the public.

Isolation must be voluntary. People are perfectly capable of making their own assessment of the risks and must be free to go about their lives as they so choose. People must have the right to choose whether to isolate or not.

Likewise, businesses must have the right to remain open if they so choose.

We demand that doctors, nurses, scientists and healthcare professionals must be permitted free speech and never be censored again.

Professor Mark Woolhouse epidemiologist and specialist in infectious diseases, Edinburgh University Member of the Scientific Pandemic Influenza Group on Behaviours, that advises the Government stated that –

'...Lockdown was a monumental disaster on a global scale. The cure was worse than the disease.'

'I never want to see national lockdown again. It was always a temporary measure that simply delayed the stage of the epidemic we see now. It was never going to change anything fundamentally, however low we drove down the number of cases,'

'We absolutely should never return to a position where children cannot play or go to school.'

I believe the harm lockdown is doing to our education, health care access, and broader aspects of our economy and society will turn out to be at least as great as the harm done by

***Covid-19.*' (1)**

The World Doctors Alliance agree fully with Prof Woolhouse's assertions, he is right! We must never lockdown again!

NB the term 'covid' has been used to represent Sars-CoV-2 and Covid-19

REFERENCES

INTRODUCTION

1. [BMJ](#)
2. [CNN](#) and [WBUR](#)
3. [NHS](#)

LOCKDOWN

1. [Telegraph](#)
2. [Times](#)
3. [The Lancet](#)

COLLATERAL DAMAGE

1. [BMJ](#)
2. [Time](#)
3. [Dr Malcolm Kendrick](#)
4. [QNI](#)
5. [BBC](#)
6. [BBC](#)

DEATH CERTIFICATES

1. [Spectator](#)
2. [Telegraph](#)

ECONOMIC RUIN

1. [Independent](#)

CENSORSHIP

1. [Guardian](#)

TESTS

1. [BMJ](#)
2. [Spectator](#)
3. [CEBM](#)
4. [Lockdown Sceptics](#) and [DOI](#)
5. [ANH International](#)
6. [Gov.UK](#)
7. [Lancet](#)
8. [Apps Online](#)

HCQ

1. [Newsweek](#)
2. [Guardian](#)
3. [Lancet](#)
4. [Apps Online](#)
5. [Apps Online](#)
6. [NIH.GOV](#)
7. [NIH.GOV](#)

PREVENTION

1. [BMJ](#)
2. [DOI.ORG](#)
3. [DOI.ORG](#)

CONFLICTS OF INTERESTS

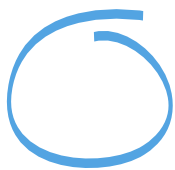
1. [Telegraph](#)
2. [Telegraph](#)
3. [Apps Online](#)
4. [Statnews](#)

CONCLUSION

1. [Express](#)

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