## Wuhan Lab, Bioweapon, Gain of Function, but...the SARS-CoV-2 Virus Doesn't Exist in the First Place

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## Putting the Paradox Together

by <u>Jon Rappoport</u>, <u>No More Fake News</u> May 31, 2021

What I'm about to lay out might seem "too staggering to believe."

Fortunately, what people do or don't believe isn't the issue.

And with that, here we go. Buckle up.

For the past year, I've been presenting evidence that the SARS-CoV-2 virus doesn't exist. It's never been proven to exist.

Those who claim it does exist have two legs to try to stand on. One: the virus has been isolated (discovered). And two: its genetic sequence has been found.

However, the mainstream scientific definition of "isolated" turns out to mean: "We have the virus in a soup in a dish in a lab. The soup contains all sorts of material. We never extracted the virus from the soup." In other words, "isolated" means its opposite.

In the soup, in addition to the purported virus, there are human and monkey cells, toxic drugs, chemicals, and other genetic material. When the cells begin to die, researchers assert (with no proof) that the cause of cell-death must be the virus.

Therefore, the virus IS in the soup, and it is deadly.

However, the drugs and chemicals could be killing the cells, and the cells are being starved of nutrients, so that could certainly account for their death.

Bottom line: There is no proof of isolation. It isn't even close. There is no evidence that the purported virus is in the soup.

I've published a typical account of virus-isolation from a study, and Dr. Andrew Kaufman did a step-by step analysis of this process and tore it to pieces. I published his analysis. Dr. Kaufman showed there was no merit to the claim that SARS-CoV-2 had been isolated.

What about the genetic sequencing of the virus? You can't sequence something you haven't isolated (discovered). To claim you have sequenced it would be like saying, "We have a generic fragment of iron dust, and we know it comes from a 1932 Ford Moon Rover fender." There was never a 1932 Ford Moon Rover.

Researchers presume, assume, guess, pretend that "SARS-CoV-2" WOULD HAVE certain pieces of genetic material, and referring to libraries which contain data about such material, they use a computer program to cobble together pieces of data and present a genetic portrait of "SARS-CoV-2."

If we were discussing a science fiction novel about a virus, we might say, "That's an interesting genetic sequence. An interesting castle in the air."

Now—to bridge over from this part of the article to the Wuhan lab, gain of function research, tweaking a coronavirus to produce a dangerous entity, we need to know one thing:

Mainstream researchers—virologists, molecular biologists—BELIEVE they are working with a real virus. Most of them certainly believe this. They are married to their fallacious and fantastical processes of proving a given virus exists.

And because they believe, so do politicians and public health officials and military leaders.

Therefore, we could certainly say, if the evidence is convincing, that there has been an effort to ramp up the function of a coronavirus in Wuhan.

But EFFORT and TRYING have nothing to do with the truth.

Based on unproven and untenable beliefs, people have TRIED TO DO all sorts of things. And some of those people have CLAIMED that they SUCCEEDED.

Therefore, it's really quite easy to see how a) the virus has never been proven to exist and b) some researchers have been trying to ramp up the function of a fantasy they call a virus.

"But...but if the virus doesn't exist, what are these researchers in their lab in Wuhan doing? What are they working with? What's going on?"

Yes, I like that question. But you see, in the Church of the Virus, the inner sanctum, the holy of holies—THE HIGH-SECURITY LAB—is not open to you or me or anyone from the outside.

We (and dissenting scientists) can't look over researchers' shoulders. We can't film every step they take. We can't stop them at any point and make them explain what they're actually

doing. We can't say, "You just fabricated a conclusion out of thin air, so justify it." We can't challenge their ironclad beliefs about the truth and validity of their procedures as they're actually carrying out those procedural steps.

"What? You call that isolation? You didn't isolate anything. You just stirred the soup in the dish. Explain yourself. And the gene you say you just tweaked? What gene? Let's go back over that again. You just fiddled with DATA about a gene in a so-called virus. Makes no sense. Let's review that move. Let's break it down."

No, we can't do any of this.

Instead, we're supposed to have faith in what these researchers have faith in.

If this amounts to science, Kool-Aid is the nectar of the gods.

"Excuse me, Doctor Towering-Arrogant, but you just plugged your latest 'finding' into a computer program, which is supposed to spit out the genetic sequence of the 'new tweaked virus you just created'."

"Yes? So?"

"First of all, you're working with DATA here, not actual physical material. But we'll put that aside for the moment. I want to know exactly what's in this computer program. These five people standing with me here in the lab? They're software pros. They have no allegiance to any government or funding entity. I want them to take the computer program apart and analyze it."

"I'm not responsible for the program."

"Who is?"

"Colleagues. I don't know them personally."

"Well, get them in here now. All research stops until we have them here in the lab. They'll open the whole computer program to the light of day, explain it, and then I'll have my people go through it with a fine-tooth comb."

"That's outrageous. Why?"

"To see if the program is credible, or just another fantasy constructed to give the false appearance that you're actually sequencing something."

We're not permitted to do that, either.

We're in Church. We must accept all the prescribed articles of faith.

For those people who not only claim SARS-CoV-2 was tweaked or invented in a Wuhan lab, but was made deadly there...they should consider the extraordinary lengths to which public health officials have gone to FALSELY pump up COVID case and death numbers.

None of that pumping would be necessary if an actual PANDEMIC virus existed and were loose in the world.

During the past year, I've covered all the criminal schemes to inflate case numbers. To cite just one scheme: Running the PCR test at an unconscionably high sensitivity has automatically created millions and millions of "positive COVID cases." In concert with this fraud, the CDC has changed its definition of "a case," so people who test positive but remain healthy with no symptoms can be counted as "COVID cases."

Now, I'm going to present a Part Two to this article. It isn't necessary, but some people are thinking: "If it isn't the virus, why are so many people dying?" I've written perhaps a dozen pieces that answer this question. Here is a shortened version:

-The disease switcheroo; they don't teach this in medical school.

I've mentioned this shell game hundreds of times in articles and lectures over the years. Here I want to boil it down to a protocol that has earned the medical cartel trillions of dollars.

We begin the story with an "outbreak." Somewhere on Earth, we are told there is a cluster of unusual cases of illness.

The key word is "unusual." Otherwise, who would care? People would instead say, "Forty people in Wuhan have lung congestion." And that would spark no interest.

In Wuhan, it was "unusual pneumonia." How so? No convincing answer. Some people have cited a "ground glass" appearance in pictures of patients' lungs. Meaning gray areas, or opacity. Another claim: patients had extreme shortness of breath.

But opacity and shortness of breath were mentioned and described in medical literature long before COVID.

Something else must be offered, to justify the term "unusual cases." And we get it almost immediately, while we're still trying to figure out what makes these patients' illness new and different:

It's a virus. A never-before-seen virus.

Already a switcheroo is in progress. There is actually nothing unusual in the Wuhan cluster of cases. And just as we're about to realize that, we're hit with "new virus." And then we forget there was no reason to look for a new virus in the first place.

Deadly air pollution has been hanging over Wuhan for a long time. It explains all sorts of lung infections, including pneumonia, the cardinal COVID symptom. And by the way, roughly 300,000 people in China die every year from pneumonia.

The "new virus" is trumpeted. But of course, as I've demonstrated many times, it hasn't actually been found. No one isolated it. The so-called genetic sequencing of it was a fictional castle in the air based on supposition. How could it be otherwise? No one has an isolated and purified specimen of the virus that can be analyzed.

Accepting "new virus" as fact produces this situation: a list of very familiar clinical symptoms can now be called unique, because the cause is unique.

Suddenly, cough, chills, fever, fatigue, congestion, shortness of breath—which have been called flu, or just infection, or other names—are COVID. That's the big switcheroo.

Next step: provide a diagnostic test for "the virus" that would automatically spit out false-positives like water from a firehouse. That's the PCR. I've taken the PCR apart six ways from Sunday and exposed it as a fraud.

With the PCR in hand, the switcheroo is deepened. That list of familiar illness symptoms—taken together with the test—paints the picture of millions of cases of a "new plague."

All this fabrication is on the order of—"Hey, Jim, sales of our widget number 6 are in the toilet. What can we do? Unless…let's call it widget number 7, put it in a new box…"

People say, "But there ARE mysterious COVID cases that can't be explained away as repackaged lung infections..."

Of course there are. When you make the net big enough, it will sweep in groups of cases that seem to defy explanation. But when you move in close enough, you discover a variety of factors that cause illness and death. New poisonous vaccination campaigns, toxic pesticides, lagoons of feces in giant pig factory-farms, opioid drugs; even various electromagnetic technologies.

I first caught on to the switcheroo in 1987, when I was doing research for my first book, AIDS INC. Scientists in Africa were investigating a "new" outbreak among people who, "incidentally," were suffering from protein-calorie malnutrition, hunger, and starvation.

The scientists, cheap con artists that they were, called this "wasting syndrome," then "Slim disease," and finally "AIDS." They announced the cause was HIV—a virus no one had isolated.

And lurking in the background, if you needed another cause of illness and death, there was the infamous World Health Organization mass smallpox-vaccination campaign in Africa, one of the most dangerous mass medical experiments ever carried out on a population. That campaign had wrapped up injecting millions of people several years before "the discovery of AIDS."

The campaign was so dangerous that, at a secret WHO meeting in Geneva, a decision was made never to use that vaccine again, because it had caused smallpox (or something that looked like it).

In 1987, I combed through volumes of medical journals at the UCLA bio-med library, and discovered that the single most prevalent cause of T-cell depletion ("AIDS") in the world is MALNUTRITION.

In Africa, malnutrition, hunger, starvation, contaminated water supplies, lack of basic sanitation, toxic vaccines, grinding poverty, war, fertile farm land stolen from the people by major agricultural corporations, toxic medical drugs...were all repackaged as a new disease caused by a new virus, HIV.

I then went on to study every so-called high-risk group for AIDS. I found that in each group, all the "AIDS symptoms" could be explained by non-viral causes.

At that point, I realized I was looking at a classic intelligence-agency-type covert operation, applied within the medical universe. The virus was the cover story. It was being use to hide ongoing government and corporate crimes. For example—forced starvation.

A con is a con.

Only the disease-names are changed, to protect the guilty.

With COVID, you must also consider the following: an extraordinarily high percentage of cases and deaths are occurring in people over the age of 65. The elderly. Many of these people are living in nursing homes and other long-term care facilities.

IB Times, 7/27/20: "New research from the Kaiser Family Foundation has indicated that while adults 65 and older only account for 16% of the U.S. population, they make up 80% of COVID-19 deaths."

CDC, May 14, 2021: "8 out 10 COVID-19 deaths reported in the US have been in adults 65 years old and older."

Why are these older people dying?

Because they have long-standing serious health problems. And for years, even decades, they've been treated with an array of toxic medical drugs.

Then, in 2020, they're terrified they might be diagnosed with COVID. And then they ARE diagnosed. Which ramps up their terror.

On top of all of this, they're neglected by nursing home staffs, even handled brutally in some cases. They're isolated "because of COVID," imprisoned, cut off from family and friends. They're alone.

So they give up and fold up and die.

No virus required as an explanation.

In a large study of New York state hospitals, it was discovered that people over the age of 65 who were diagnosed with COVID, and put on breathing ventilators, died at the rate of 97.2 percent.

No matter what the prior condition of the patient, any treatment that has a death rate of 97.2 percent must be discontinued at once. But it wasn't discontinued. It still goes on. This amounts to murder.

"People are dying, it must be the virus." No. Wrong.

There is no "it." People dying from various causes are fictionally brought under one umbrella, called COVID-19.

This is titanic fraud, tragedy, mass murder—murder compounded many times by the destructive vaccine, aka genetic treatment.

It didn't originate in a lab in Wuhan.

But the story that it did originate there cements the premise, in many minds, that we are dealing with a virus.

Quite convenient.

The Wuhan lab, intentionally or unintentionally, becomes a cover story that obscures the truth.

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