

[01] - 00:00:22 - Sam Bailey - What We Weren't Taught About The Plague?

<https://odysee.com/@drsambailey:c/What-We-Weren't-Taught-About-The-Plague:a>

[02] - 00:03:12 - “What Made The Black Death (The Plague) so Deadly?”, The Infographics Show, 3 May 2019

<https://www.youtube.com/watch?v=m5q-PIN3KSE>

[03] - 00:04:39 - Cochrane

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7387759/>

In addition to the sporadic cases and outbreaks, because of the characteristics of the disease resulting in high mortality, *Y. pestis* has been used as a biological weapon and is currently a bioterrorism threat (CDC 2019).

Due to its historical pandemics and high fatality rate, plague continues to cause fear and panic, and is sometimes associated with a disproportionate public health response, which has considerable social and economic consequences (Mavalankar 1995; Mead 2018). A clinical diagnosis of plague is difficult and not reliable. The symptoms of pneumonic plague are not specific and can be present in a person with pneumonia caused by many other pathogens. These include other bacteria such as streptococcus pneumoniae or tuberculosis, that would require different antibiotics than plague, but also viruses, such as influenza, which would require no antibiotics. A person with a swollen lymph node in an endemic area or in the context of an outbreak is more likely to receive an accurate diagnosis of bubonic plague than people with suspected pneumonic plague. However, other diagnoses need to be considered, mainly other infections that cause swollen lymph nodes such as pyogenic abscess, tularaemia, tuberculosis, lymphogranuloma venereum, and cat scratch fever. A point-of-care diagnostic tool that is quick to use and highly accurate would help ensure appropriate response, especially in the context of outbreaks.

Index test(s)

Rapid diagnostic tests (RDTs) detect pathogen-specific antigens in a small quantity of different body fluids through lateral flow immunochromatography. RDTs are widely used in other diseases, such as malaria (WHO 2019b). They are usually easy to use and interpret. Indeed, they can be performed at the bedside of the patient without the requirement of special equipment or laboratory facilities. They give a simple result within around 15 minutes – positive or negative, at thresholds set by the manufacturer – that can easily be interpreted by health workers without advanced training. Therefore, RDTs are useful diagnostic tools for use at the community level and in low-resource settings (WHO 2019b).

[04] - 00:05:15 - “Black Death”, Wikipedia

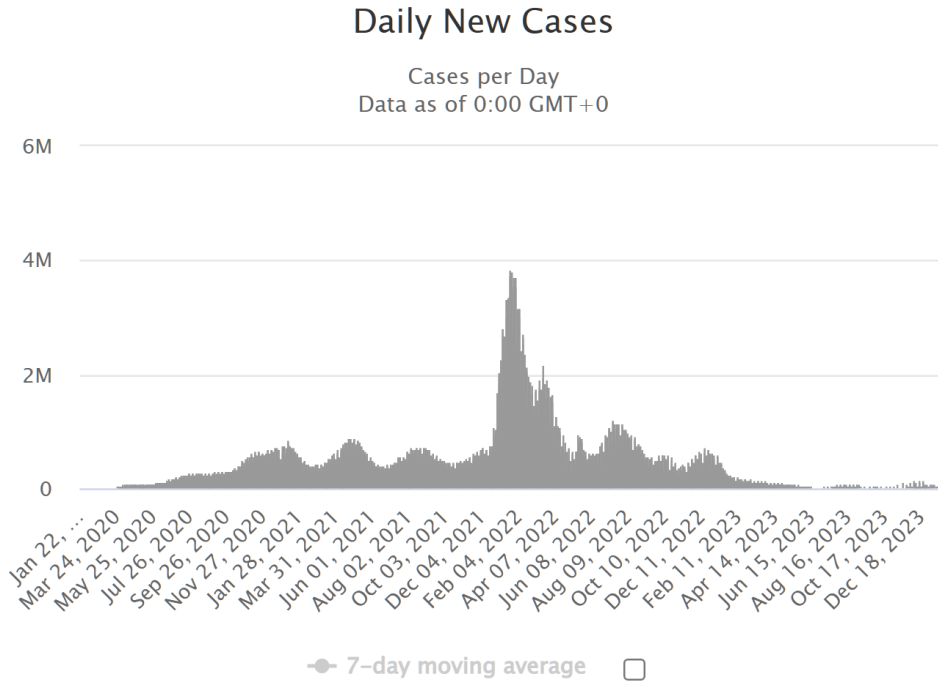
https://en.wikipedia.org/wiki/Black_Death

[05] - 00:05:57 - “List of epidemics and pandemics”, Wikipedia

https://en.wikipedia.org/wiki/List_of_epidemics_and_pandemics

[06] - 00:06:16 - Worldometers:

<https://www.worldometers.info/coronavirus/>



[07] - 00:08:20 - David Packer and Dawn Lester

<https://whatreallymakesyouill.com/about-us/>

[08] - 00:08:23 - What Really Makes You Ill?, Dawn Lester and David Parker, 2019

<https://whatreallymakesyouill.com/book-preview/>

[09] - 00:08:41 - What Really Makes You Ill?, Dawn Lester and David Parker, 2019, p210+211

<https://mega.nz/file/ncpAkbhT#baBrfWsqAzk27SyCijfEl1b6NNHUu8M4MeLLONigTdo>

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The archaeological evidence has not yet persuaded the medical establishment to alter their obviously incorrect theory.

It sometimes requires a scientist from an entirely different scientific discipline to view evidence from a new perspective, and thereby produce a more compelling explanation for that evidence. In this instance, a new hypothesis about the likely causes of the Black Death has been developed by a dendrochronologist, a scientist who studies tree-rings to identify different growth patterns.

The dendrochronologist in this instance is Professor Mike Baillie, whose study of tree-ring data of the 14th century led him to discover some interesting tree growth patterns, and to undertake further investigations that included the study of ice-core data, as well as contemporary 14th century accounts of the event. Professor Baillie has recorded the results of his research and the basis for his hypothesis in his book entitled *New Light on the Black Death*, in which he includes extracts from some contemporary documents. One of the extracts he quotes includes the statement that,

“There have been masses of dead fish, animals and other things along the sea shore and in many places trees covered in dust and all these things seem to have come from the great corruption of the air and earth.”

Contemporary writers were sufficiently observant to be aware of, and write about, ‘masses of dead fish, animals and other things along the sea shore’, as well as ‘trees covered in dust’. They would, therefore, also have been sufficiently observant to have noticed, and specifically written about, masses of dead rats or even gerbils, had there been any to observe. Such reports are conspicuous by their absence; a situation that supports the archaeological findings.

An even more significant aspect of the quoted extract is the reference to ‘the great corruption of the air and earth’. In addition to these documents, Professor Baillie obtained evidence from his

environmental trough'; it was sufficiently severe to have been able to cause death from respiratory problems; as Professor Baillie states,

“The most likely mechanism would be through affecting their respiration system in some catastrophic way. After all, writer after writer on the Black Death makes the point that it is the ‘pulmonary’ form of the disease that was the dominant killer.”

It is clear therefore that ‘something’ must have occurred to have caused such a severe corruption of the atmosphere over a large portion of the world. One interesting and undisputed fact is that a major earthquake erupted in Europe on 25th January 1348. Professor Baillie reveals however, that this was not a singular event, but part of a series of earthquakes that occurred during the mid-14th century, both before and after the January earthquake.

Another interesting piece of the puzzle is that an unusually high level of ammonium has been discovered from the examination of ice core data. A higher than normal level of ammonium has also been discovered in ice cores that have been dated to periods in which other epidemics of ‘plague’ occurred. The result of his investigation of the evidence led Professor Baillie to conclude that,

“There really is enough information about comets, earthquakes and ammonium to permit the quite serious suggestion that the Black Death was due to an impact by comet debris on 25th January 1348 as witnessed by the major earthquake on that day.”

Investigations and analysis of the toxic chemicals found within comets and comet debris have produced further supportive evidence for this conclusion; Professor Baillie explains,

“Apart from ammonium, it is now known that a range of unpleasant, toxic and evil-smelling chemicals, including hydrogen sulphide and carbon disulphide, have been detected in recent comets.”

The presence of ‘evil-smelling chemicals’ would certainly explain the documented reports about the ‘corruption of the atmosphere’;

[10] - 00:09:35 - “Plague”, Fact sheet N°267, World Health Organization.

<https://web.archive.org/web/20150424065540/http://www.who.int/mediacentre/factsheets/fs267/en/>

[11] - 00:10:22 - “Plague”, Lancet, 7 Apr 2007

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(07\)60566-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)60566-2/fulltext)

[12] - 00:10:32 - Thomas Butler - Plague and other yersinia infections

https://mega.nz/file/CRpzilCJ#jafS_5nTwf9LRokaRF0IFWigxfpXO5YS99vExRzV3Tk

[13] - 00:10:39 - Primary Pneumonic Plague in Mukden, 1946, and report of 39 cases with 3 recoveries

<https://academic.oup.com/jid/article-abstract/82/1/52/824139?redirectedFrom=fulltext>

<https://www.jstor.org/stable/30088952>

[14] - 00:11:19 - “The Truth About Antibiotics”, Dr Sam Bailey, 21 Oct 2023

<https://drsambailey.com/resources/videos/germ-theory/the-truth-about-antibiotics/>

[15] - 00:12:50 - Barney Sloane

<https://www.history.com/news/can-we-stop-blaming-rats-for-the-black-death>

[16] - 00:12:54 - The Black Death in London, Barney Sloane

https://mega.nz/file/icQilAYA#2Uv52ncR-if5wbwHTT8IIBfVeOLs4-Y_uhqPeeZ2LjU

[17] - 00:13:24 - Human ectoparasites and the spread of plague in Europe during the Second Pandemic, PNAS, 2018

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5819418/pdf/pnas.201715640.pdf>

[18] - 00:13:31 - European Research Council

<https://erc.europa.eu/homepage>

[19] - 00:13:34 - Imperial College of london

<https://www.imperial.ac.uk/>

[20] - 00:13:36 - Centers for Disease Control and Prevention

<https://www.cdc.gov/>

[21] - 00:14:55 - Paul-Louis Simond

https://www.wikiwand.com/fr/Paul-Louis_Simond

<https://www.pasteur.fr/fr/institut-pasteur/notre-histoire/paul-louis-simond-multimissionnaire-maladies>

[22] - 00:15:08 - Rapport : sur les cas de Peste traités dans l'inde anglaise au moyen de sérum antipesteux préparé à l'institut Pasteur de paris par M. le dr Roux, de M le Dr Simond. P 349

<https://www.biusante.parisdescartes.fr/histoire/medica/resultats/index.php?do=page&cote=131132x1898x01&p=349>

“Paul-Louis Simond and his Work on Plague”, Perspectives in Biology and Medicine, 1996

<https://muse.jhu.edu/article/401226>

“Paul-Louis Simond and his discovery of plague transmission by rat fleas: a centenary”, Journal of the Royal Society of Medicine, 1998

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1296502/pdf/jrsocmed00028-0047.pdf>

[23] - 00:15:40 - Sur le rôle des parasites du rat dans la transmission de la peste : note / de J.C. Gauthier et A. Raybaud.

<https://wellcomecollection.org/works/wnhq8nm3>

[24] - 00:15:44 - Figure 3

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1296502/pdf/jrsocmed00028-0047.pdf>

00:15:55 - J A Thomson + Verjbitsky

[25] - 00:16:33 - “On the Epidemiology of Plague”, Dr J. Ashburton Thompson, 1906

<https://www.jstor.org/stable/3858800>

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The first outbreak in Sydney consisted in 303 cases, and the requisite particulars were learned in 289 of them. Those 289 persons had lived in 276 dwellings; 266 of the dwellings had harboured but a single case apiece. After an interval of 15 months, during which no plague had been seen either in man or in animals, the second outbreak began. It consisted in 139 cases, which were found in 124 dwellings (including one ship long in port); 115 of those dwellings harboured but a single case apiece. Subsequent experience has been precisely the same. The patients were very promptly removed to hospital after notification, no doubt, but in the vast majority of cases which came under treatment notification was delayed until the third day of illness, or later still; additional to them were 51 persons who died at home at, or before, the hour of notification. All those persons, then, had ample opportunity of communicating their disease to their housemates but, as appears from almost all the dwellings having harboured only one case, they did not do so. Further, many of those persons received the infection at the centre of the City which was the original point of invasion, and retired to their dwellings as soon as they began to feel ill. Those dwellings were situated in large proportion in the suburbs, from two to three miles up to about ten miles away from the centre; and about a dozen persons reached places some hundreds of miles away, where they passed through their illness under circumstances which did not permit of isolation from the rest of the family nor, perhaps, from their neighbours. In all of the very distant places, and in a very large proportion of the suburban places, no plague, either in man or in animals, was afterwards seen. Non-communication was the rule, then. What at first appeared to be secondary cases did occur occasionally; but I shall show that they resulted from exposure to a common source of infection, not from communication with the sick.

Even in India it has turned out to be possible to examine the question of communicability in a similar way; and as soon as it was so examined similar evidence was obtained. Pearse, 1904, stated the figures for three of the Districts of the city. In District I, 1521 cases occurred; 1002 huts furnished only 1173 cases, and 287 pukka buildings only 316 cases (and 32 cases were undistributed). In District II, there were 2049 cases; 1023 huts furnished only 1222 cases, and 642 other buildings 827 cases. In District III, there were 728 cases; 539 huts yielded but 582 cases, and 127 pukka buildings only 137 cases (and 9 cases were undistributed). Unfortunately notification was far from complete, though improved; however, Dr Pearse thought that this evidence weighed against maintenance by communication with the sick, against indirect communication by fomites, and against persistence of the infection on premises.

(b) *Indirect communication.* Dissemination of the infection by means of articles which had become infected in plague-houses so as to contribute importantly to production of an epidemic, if at all possible, could take place only if those who suffered commonly pawned or sold their household goods during illness. As a matter of fact, no such diffusion of articles took place. Distress, consequent on illness and loss of work, had not time to make itself felt before the houses fell into the hands of the disinfecting staff. But were the infection commonly capable of being spread indirectly by infected articles no such clear answer as that given to the preceding question could have been made. We have no ground for suspecting that the infection of plague can be spread by clothing, bedding, or other articles of household use.

Can articles which were not infective within houses become so as a consequence of mere removal outside the houses? Accounts are forthcoming from India of transmission of this infection with clothes, or by persons who were not themselves suffering. The surrounding circumstances in which such cases were observed have not been described in the requisite detail; however, had sufficient experimental evidence that fleas could communicate plague been already adduced, then it would be easy to understand how articles which appeared to be not infective within houses might become so after issuing from them. For during transport the fleas would be starved, and they would seize the first opportunity of taking blood (Tidswell, 1902, p. 73; Gauthier and Raybaud (1903)). It should be noted with reference to those Indian accounts that our people, having been respectable artisans, etc., for the most part, were not infested with vermin as the poorer natives of India generally are.

The evidence, then, collected under the usual conditions of civilised life in 1900 and in 1902, suffice to show that neither direct nor indirect communication with the sick is a factor in the causation of epidemics, and this fundamentally important judgment has been fortified by all the experience of subsequent years. It carries with it the corollary that *the infection spread in epidemic form by means which were (a) external to man, and (b) independent of his agency.*

2. *The infection is associated in some way with locality.*

The disease claimed many victims, although it did not spread from person to person. The infected must have shared something, therefore. We discovered what this was as soon as scrutiny of dwellings in relation to infection was exchanged for scrutiny of workplaces. Already in 1900, 17 groups of cases had been noted which consisted of from two to four persons in each, the total number concerned having been 43 persons, who occupied 43 separate and scattered dwellings. There

the presence of plague-rats in every case without exception ; but it had also been observed by us in previous years.

If all the "normal results" which I have described separately be now considered together I think it will be conceded that nothing can co-ordinate them, and reconcile the apparently contradictory features of some of them, except the assumption that *the infection of plague exists in, and is disseminated with, the bodies of some species of lower animal which is free to wander*. Thus the centre of interest passes for the present from man, to the only animal which at once lives in close association with him and is conspicuously subject to plague.

III. Phenomena of Epizootic Plague.

1. *Need to watch the rat closely and continuously.*

The association between plague in man and in rat which has now been very frequently observed in many different parts of the world tempts the inference that man takes plague from the rat ; and it has been very generally drawn. However, on reflection it will appear that no good ground of inference has thus been disclosed, and that in reality only a coincidence has been noted which collateral circumstances have shown to be worth investigation—the scent, not the quarry. But systematic investigation has rarely been accorded to it. As a rule the observed points consist solely in plague in (a) man, and (b) concurrent plague in the rats in his neighbourhood. Nothing is known, or at least nothing has been intelligibly recorded, of the rats over the whole of any town, in the parts where plague is not as well as those in which it is. Hence the question of causality has been left open. A suggestion that both may have taken the infection from some common source remains plausible ; and it is by no means disposed of by showing (as has been shown with that intention) that persons who live away from the rat-infested neighbourhood only take the disease if they resort to it, or only after diseased rats have been observed in the neighbourhood of their dwellings. In order to elucidate it it is necessary that the rat should be watched all the year round, while plague is present and when it is absent ; and in reporting results it is further necessary that the duration, extent, and means of search, as well as the way in which infection with plague was ascertained, should be carefully described. This has not yet been done in India ; and it is precisely in India that many experiences

[26] - 00:19:41 - "Black Deaths Victim's Teeth Analysis Reveals Shocking Results", Channel 4, 2018

<https://www.youtube.com/watch?v=uMy67j1oaRY>

[27] - 00:22:34 - Rosenau Milton J 1919 Experiments To Determine Mode Of Spread Of Influenza Journal Of The American Medical Association

<https://archive.org/download/rosenau-milton-j-1919-experiments-to-determine-mode-of-spread-of-influenza->

journ/Rosenau%20Milton%20J%201919%20Experiments%20to%20Determine%20Mode%20of%20Spread%20of%20Influenza%20Journal%20of%20the%20American%20Medical%20Association%2073%285%29%20311-13.pdf

The Rosenau Experiment, 1918-1919

<https://www.ggarchives.com/Influenza/TheRosenauExperiment-1918-1919.html>

[28] - 00:22:48 - Bailey videos

-Polio : [\(49\) Toxicology vs Virology - Rockefeller Institute and the Criminal Polio Fraud \(odysee.com\)](#)

<https://odysee.com/@drsambailey:c/Toxicology-vs-Virology-Rockefeller-Institute-and-the-Criminal-Polio-Fraud:1>

-Chickenpox : [\(49\) Chickenpox Parties and Varicella Zoster Virus? \(odysee.com\)](#)

<https://odysee.com/@drsambailey:c/chickenpox-parties-and-varicella-zoster:f>

-Gonorrhea : [\(49\) What We Weren't Taught About Gonorrhea \(odysee.com\)](#)

<https://odysee.com/@drsambailey:c/What-We-Weren't-Taught-About-Gonorrhea:b>

-Meningitis : [\(49\) The Meningitis Mystery \(odysee.com\)](#)

<https://odysee.com/@drsambailey:c/The-Meningitis-Mystery:d>

[29] - 00:24:30 - SupportDrSam.com

<http://www.SupportDrSam.com>

[30] - Music des génériques :

Michael Heart "We will not go down (song for Gaza)" - 2009

original :

<https://open.spotify.com/album/0NR1F4RxKi4c1x1dgOnWhn>

The Instrumental Guitare :

Fingerstyle By Cedda For Gaza :

https://www.youtube.com/watch?v=CDodFpKw_Sg