



Scamdemic Part 2:

Pandemic Lies, Masks and Covid 19 Testing

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There was NEVER a Pandemic in 2020 and This is Why: Proof 1

- Per Genevieve Briand, of Johns Hopkins University: These are the facts from CDC data analyzed in a graph from February 2020 to September 2020:
- After looking at total number of deaths in the United States including Covid 19 deaths in 2020, “she concluded that the number of deaths by COVID-19 is not alarming. In fact, it has relatively no effect on deaths in the United States **(TRANSLATION: NO PANDEMIC in 2020).**”
- She also concluded that increase in all deaths is seasonal and also that “that the COVID-19 death toll is misleading. Briand believes that deaths due to heart diseases, respiratory diseases, influenza and pneumonia may instead be re-categorized as being due to COVID-19. Even patients dying from other underlying diseases but are infected with COVID-19 count as COVID-19 deaths.” The CDC classified all deaths that are related to COVID-19 simply as COVID-19 deaths.”
- Source: <https://web.archive.org/web/20201129232746/https://web.archive.org/web/20201126223119/https://www.jhunewsletter.com/article/2020/11/a-closer-look-at-u-s-deaths-due-to-covid-19#close>



There was NEVER a Pandemic in 2020 and This is Why: Proof 2

- **LIES:** Imperial College's modeler and Bill Gates minion Neil Ferguson (funded by Bill and Melinda Gates Foundation) **LIED** in his Covid 19 models. "As Ferguson's team wrote on March 26, 2020: "Our estimated impact of an unmitigated scenario in the UK and the USA for a reproduction number, R_0 , of 2.4 (490,000 deaths and 2,180,000 deaths respectively)." Meaning mortality rate of 2.4% through Covid 19. This FRAUDULENT model was adopted by the U.S, the UK and by the Swedish governments with disastrous effects through lockdowns, masks, economic meltdown of economies and a complete and utter SUCCESSFUL fear mongering campaign that continues to this day. Birx and Fauci took Ferguson's model and gas lighted Trump for 4 hours in the Oval Office and at the end of the 4 hours, Trump was prepped by the globalists to declare an EMERGENCY MEDICAL MARTIAL LAW that still stands today.
- **TRUTH:** As Genevieve Briand in the last slide pointed out: there was no cause for alarm as there was HARDLY any increase in TOTAL DEATHS in the United States WITH Covid 19. **TRANSLATION: NO PANDEMIC in 2020.**
- Source: <https://www.aier.org/article/the-failure-of-imperial-college-modeling-is-far-worse-than-we-knew/>
- Source: <https://blog.nomorefakenews.com/2022/07/20/neil-ferguson-the-ghost-in-the-machine/>



Pandemic Lies: Remdesivir, Ventilators, and Asymptomatic Transmission

- **Lies:** Remdesivir and Ventilators save lives and CURES Covid 19.
- **Truth:** Remdesivir is a hepato (liver) and nephro (kidneys) toxic anti viral drug made by Gilead Sciences and Fauci was/is their pimp. People were dying from lack of oxygen called hypoxia in the hospitals and instead of administering oxygen they were asphyxiated with ventilators.
- **Lies:** Asymptomatic transmission of SARS COV 2 causing Covid 19 from person to person.
- **Truth:** There is NO SARS COV 2 virus which has been isolated, hence there is no asymptomatic transmission of anything. By definition, asymptomatic means free of disease and symptoms, so logically you house NO VIRUS in your body. Per the *British Medical Journal* (BMJ): “A city-wide prevalence study of almost 10 million people in Wuhan found no evidence of asymptomatic transmission.”
- Source: <https://ahrp.org/faucis-promotional-hype-catapults-gileads-remdesivir/>
- Source: <https://www.bmj.com/content/371/bmj.m4851>



More Pandemic Lies: Masks Prevent Transmission of Covid 19

- **Lies:** Masks prevent transmission of Covid 19.
- **Truth:** Per the CDC, mainstream media, FDA, the worldwide academic establishment and the National Institute of Virology in Pune, India, the SARS COV 2 virus is between 70 to 80 nanometers in size. Pore sizes in masks are as follows: surgical mask pore sizes are 0.3 micrometers (300 nanometers) to 10 micrometers (10,000 nanometers), and the N95 mask pore sizes are 0.1 micrometers (100 nanometers) to 0.3 micrometers (300 nanometers). So this **DECISIVELY** proves that all masks; surgical, cloth and N95 masks are not just useless in preventing transmission, but exceptionally toxic to health (as we will see in the next slide).
- Source: <https://awakenindiamovement.com/masks-pore-size/>



The Delusion of Face Diapers: AKA Masks

- **Lies:** Masks are exceptionally beneficial to prevent transmission of Covid 19 and are perfectly fine for LONG TERM, CONTINUOUS wear.
- **Truth:** Per the Awaken India Movement and Brian Fernandes and his “treatise” findings on the detriment of mask wearing are phenomenal in this 51 page document: <https://awakenindiamovement.com/usage-of-face-masks-during-covid-19-a-treatise/>
- Long term usage of masks may lead to lung cancer: <https://awakenindiamovement.com/long-term-mask-use-may-contribute-to-advanced-stage-lung-cancer-study-finds/>



The Delusion of Face Diapers: AKA Masks (Continued)

- **Lies:** Masks are exceptionally beneficial to prevent transmission of Covid 19 and are perfectly fine for LONG TERM, CONTINUOUS wear.
- **Truth:** Masks, friable mask particulate and lung vulnerability: https://pdmj.org/papers/masks_false_safety_and_real_dangers_part1
- **Masks: Microbial challenges:**
https://pdmj.org/papers/masks_false_safety_and_real_dangers_part2
- **Masks causing hypoxia and hypercapnia:** https://pdmj.org/papers/masks_false_safety_and_real_dangers_part3
- **Masks actually INCREASE risk of what we call “Covid 19”:**
https://pdmj.org/papers/masks_false_safety_and_real_dangers_part4



The Delusion of Face Diapers: AKA Masks (Continued)

- **Lies:** Masks are exceptionally beneficial to prevent transmission of Covid 19 and are perfectly fine for LONG TERM, CONTINUOUS wear.
- **Truth:** A Comprehensive mask study paper authored by Stanford Medical was FORCIBLY RETRACTED:
<https://reader.elsevier.com/reader/sd/pii/S0306987720333028?token=8C225636B1BF8CB72071DF42B048C93F0049F2FF320635F67244779244B483475D5D0772DF8E96CD740169DD1A3F2492&originRegion=us-east-1&originCreation=20220726064408>
- Second link to Stanford study:
<https://www.sciencedirect.com/science/article/pii/S0306987720333028?via%3Dihub>
- Danish Mask study: HUGE Danish mask study done by 20+ researchers at the University of Copenhagen were DENIED/DELAYED publishing as evidenced by this tweet by Alex Berenson to lead researcher in Denmark: <https://twitter.com/AlexBerenson/status/1317875526997102594>
- Danish (Danmask 19 trial) landmark mask study using 3030 participants FINALLY published: **VERDICT:** MASKS DO NOT WORK: <https://www.acpjournals.org/doi/10.7326/M20-6817>



“Pandemic of Testing”:The Different Tests for Detecting Covid 19:

- **The rapid PCR test:** Detects a current Covid infection via nasal swab. Detects genetic material belonging to the SARS-CoV-2 virus. Results are processed onsite and are delivered the same day. Usually home tests.
- **The RT-PCR test:** Referred to as a ‘molecular’ test. This test is administered via nasal, saliva or throat swab. Is considered the gold standard of Covid tests and is highly accurate. Available in a few days as it is sent to a lab for processing.
- **Antigen test:** Detects certain proteins on the surface of the virus. Collected as throat or nasal swab. Is a “rapid test” and results are available in 15 minutes and is highly inaccurate. Usually home tests.
- **Antibody test:** Blood test. Looks for antibodies in response to Covid 19 infection. Sent to a lab or can be processed on site. Is used to detect past infection or exposure to Covid 19. Not used to detect current infection.
- Source: <https://drphydration.com/blog/rapid-pcr-vs-rt-pcr/>



The RT-PCR: Diagnostic Test or Amplification Technique?

- **History of PCR:** The Polymerase Chain Reaction (PCR) technique, invented in 1985 by Kary B. Mullis, allowed scientists to make billions of copies of a scarce sample of DNA (Deoxyribonucleic acid). RT-PCR uses the principle of converting the RNA template to a complementary DNA (cDNA) using the reverse transcriptase enzyme. This cDNA then undergoes exponential amplification using PCR to form multiple copies, which are then used for downstream analysis. This technique is called RT-PCR and is currently being FRAUDULENTLY used to diagnose Covid 19.
- SARS COV 2 is a an RNA based Corona Virus, hence the RT-PCR technique is used.
- Source:<https://www.excedr.com/resources/the-basics-of-reverse-transcription-pcr-rt-pcr/#:~:text=RT-PCR%20stands%20for%20reverse%20transcription%20PCR%2C%20not%20real-time,is%20then%20converted%20to%20double-stranded%20cDNA%20and%20amplified.>



How Does PCR Work?

- To amplify a segment of DNA using PCR, the sample is first heated so the DNA denatures, or separates into two pieces of single-stranded DNA. Next, an enzyme called "Taq polymerase" synthesizes - builds - two new strands of DNA, using the original strands as templates. This process results in the duplication of the original DNA, with each of the new molecules containing one old and one new strand of DNA. Then each of these strands can be used to create two new copies, and so on, and so on. The cycle of denaturing and synthesizing new DNA is repeated as many as 30 or 40 times, leading to more than one billion exact copies of the original DNA segment.

The entire cycling process of PCR is automated and can be completed in just a few hours. It is directed by a machine called a thermocycler, which is programmed to alter the temperature of the reaction every few minutes to allow DNA denaturing and synthesis.

- Source: <https://www.genome.gov/about-genomics/fact-sheets/Polymerase-Chain-Reaction-Fact-Sheet#:~:text=Polymerase%20chain%20reaction%20%28PCR%29%20is%20a%20technique%20used,%22amplify%22%20-%20copy%20-%20small%20segments%20of%20DNA.>



Problems with Using RT-PCR as a Diagnostic Test:

- Wuhan scientists found a SMALL RNA sequence of 40 to 50 base pairs in the lung aspirate of one patient and used that as a TEMPLATE for the In Silico computer viral genome. Please remember, NO VIRUS was ISOLATED or PURIFIED, hence not found. Hence, very high likelihood that the RNA strand found was HUMAN and NOT of viral origin. I say this because when the body is sick, there is constant cell breakdown and in doing so, damaged DNA and RNA are released due to this cellular breakdown into the different parts of the body, including in the lung tissue where this RNA strand was found.
- The RT-PCR tests for this RNA sequence not the actual virus. This RNA sequence was of human and NOT of viral origin, hence one of the reasons for all the FALSE positives.
- To make matters worse, Drosten and Corman designed the RT-PCR BEFORE the actual SARS COV 2 viral genomic sequence was released publicly.



Problems with using RT-PCR as a Diagnostic Test: Continued

- No Gold Standard comparison for RT-PCR, meaning that since virus was never isolated or purified and consequently sequenced, the RT-PCR could not be compared to a virus, just to an RNA sequence. Gold standard would be the entire genome of isolated purified virus.
- No controls were used. Meaning, you have to have healthy and sick people to complete the experiment. Run RT-PCR on the sick and compare those results to the healthy subjects and consequently find the error rates of false positives on the RT-PCR.
- Very high threshold cycles at upper limits of 45 and sometimes higher were used in the RT-PCR leading to amplification of anything and everything within the sample. An ideal threshold cycle limit should be between 25 to 30.



Problems with using RT-PCR as a Diagnostic Test: Continued

- 40+ threshold cycles on the RT-PCR were causing 97% false positives and giving only 3% accurate results. A Portuguese court found the RT-PCR test to be completely unreliable and unlawful.
- Source: <https://greatgameindia.com/portuguese-court-pcr-tests-unreliable/>
- WHO also admits that the RT-PCR was returning very high false positive results https://www.theburningplatform.com/2020/12/19/who-finally-admits-pcr-tests-create-false-positives
/
- **In Conclusion:** RT-PCR is an amplification technique NOT a diagnostic test and hence should NOT be used as one.



What was Found on The PCR swab tips?

- The experimental physicist and biomaterial researcher, Dr. Antonietta Gatti examined various PCR test rods under the microscope and analyzed their ingredients. Dr. Gatti is also the coordinator of the Italian Institute of Technology's Project of Nano-eco-toxicology, called INESE. This is what she found:
- 1. The PCR test swabs were found to be made of hard materials and contain a variety of (nano) particles made of silver, aluminum, titanium, glass fibers etc., many of which are undeclared in the package leaflet.
- 2. The Biocomma "cotton" stick from Shenzhen, China, could not be determined whether it was made of carbon or cotton. The dirt in the product consisted of calcium carbonate, stainless steel or silicates.
- 3. A brush-like test stick from Manta, China, had a variety of broken fibers. Carbon, oxygen, silicone, zirconium, sulfur, aluminum, titanium and sodium were found as components of the sample.
- 4. Another swab from Biocomma seemed to consist of fiberglass or at least a coating of fiberglass. Components were carbon, oxygen, aluminum, silicone and titanium. It could not be ruled out that an additional coating consisted of organic materials.



What was Found on The PCR swab tips?

- 5. The tip of the applicator of another test stick – FLOQSwabs® – was coated with short nylon® fibers arranged vertically. FLOQSwabs® have no inner core to enclose the sample.
- 6. In Slovakia, in an unnamed hospital laboratory from Bratislava, another independent lab test was done to determine the material on the PCR swab which determined Darpa patented hydrogel, lithium and nylon.
- 7. If this isn't disturbing enough, the tests also contain ethylene oxide, used as a pesticide in agriculture and causes cancer. These ingredients are not without reason.



Effects of These Deadly Poisons from the PCR Swabs on the Body:

- 1. When swabs enter the mucous membrane, they can cause wounds and inflammation. People have gotten hardened mucous membranes often tested for SARS-CoV-2. No longer intact mucous membranes can no longer fulfill their task of repelling viruses, bacteria and fungi before they reach the airways.
- 2. Zirconium silicate titanium coatings on these swabs makes the swab fiber harder so that it is able to tear the mucous membrane. There is a possibility that the pressure applied to the smear maneuvers may break some fibers that remain in situ. If this is the case, they can cause a foreign body reaction that can damage the mucous membrane in such a way that breathing and speech are hindered.”



Effects of These Deadly Poisons from the PCR Swabs on the Body: Continued

- 3. “The “porcupine” swabs are made of hard fibers. If they scrape on the nasal mucosa, they can damage it, causing a bleeding lesion or, in any case, tissue trauma.
- 4. During the healing process of the mucous membrane, the broken fibers can penetrate the tissue without any possibility of removing them, thus causing the formation of a granuloma or fibrotic tissue, as happens with any foreign body.
- 5. These reductions pose a risk to the health of infants and children. If the tests are necessary, Prof. Gatti says, small and mild smears must be carried out in children.



Effects of These Deadly Poisons from the PCR Swabs on the Body: Continued

- 6. The Slovakia PCR swabs had DARPA patented hydrogel, lithium and nylon fibers. "After spawning a mixture of nylon fiber fragments, Darpa Hydrogel remains on the nasal mucosa under the pituitary and pineal gland along with lithium. This mixture immediately reacts with living structures to form crystals that are directionally oriented to the pineal gland, which has its own electromagnetic field. The shape of the crystals determines the type of hydrogel used. The crystals are conductive due to the lithium contained in it. The crystals can receive the signal from the transmitter to the cell and transmit signals from the cell to the transmitter. These are actually nano-antennas."



Effects of These Deadly Poisons from the PCR Swabs on the Body: Continued

- 7. Lithium is an element that does not occur naturally in humans. It is highly toxic to the pineal gland influence. In low doses it blocks it and in higher doses it can completely destroy it. The pineal gland produces serotonin (a hormone of happiness) and controls human biorhythms. It is crucial for higher brain activity (creativity, foresight, sixth sense, etc.) and for social interactions of man.
- 8. Darpa Hydrogel and lithium block and destroy the pineal gland and cause the thinking person to become a controllable bio-robot. A hydrogel is a carrier of an active substance, its task is to get the substance into the body at a pre-desired place. Additionally it appears the hydrogel is causing blood clots in the blood vessels.
- Source: <https://evolvetoecology.org/2021/05/05/what-is-in-the-pcr-tests/>



Why did 100+ Countries Order Millions of Dollars Worth of CV 19 Stuff in 2017-2019?

- A comprehensive list which shows hundreds of countries purchased Covid-19 test kits in 2017. With the European Union, Germany, United States, United Kingdom, and Belgium being the top importers. The UK alone spent £6.3 million of the British taxpayers money on Covid-19 test kits in 2017. All these governments worked in tandem to destroy and depopulate their people.
- **The name “Covid 19” did not appear until early 2020, or did it? Here is a screen shot from 2017 titled: COVID-19 Test kits (300215) imports by country:** https://web.archive.org/web/20200905210427if_/https://wits.worldbank.org/trade/comtrade/en/country/ALL/year/2017/tradeflow/Imports/partner/WLD/nomen/h5/product/300215
- **Again in 2018:** <https://wits.worldbank.org/trade/comtrade/en/country/ALL/year/2018/tradeflow/Exports/partner/WLD/nomen/h5/product/300215>
- **Then again in 2019:** <https://wits.worldbank.org/trade/comtrade/en/country/ALL/year/2019/tradeflow/Imports/partner/WLD/nomen/h5/product/300215>



Are Ivermectin, Hydroxychloroquine (HCQ) really EFFECTIVE?

- Is Ivermectin really effective? Watch this 29 minute video on what Ivermectin does, how it works, is it safe etc. Excellent video by Dr. Andrew Kaufman, M.D.:
<https://andrewkaufmanmd.com/videos/ivermectin-the-true-story-by-dr-andrew-kaufman/>
- How HCQ works: It is an anti-parasitic used for Malaria in countries like India and in Africa. It works by digesting toxins in the cell by releasing lysozomal enzymes. **See source below on how HCQ works in the human cell.**
- Source: <https://www.nature.com/articles/1206622#:~:text=Here%2C%20we%20show%20that%20HCQ%20induces%20signs%20of,phosphatidylserine%20exposure%2C%20and%20chromatin%20condensation%20with%20DNA%20loss.>



Why are Vitamin C, Quercetin, Zinc, Vitamin D3, NAC effective against CV 19?

- Vitamin C, Quercetin, Zinc, N-Acetyl Cysteine (N-AC) (Amino Acid): Are all antioxidants that neutralize oxidative damage through toxins in the cells. These antioxidants are actually scavengers of free radicals (toxins) that cause cell damage through oxidation.
- Vitamin D3: Is a pro-hormone (not a vitamin) and a multifunctional hormone. It also reduces the inflammation in the body and hence helps the cells heal from inflammatory damage. It helps every system in the body including bones, teeth, cardiovascular and endocrine systems.
- Source on how vitamin D3 might help the body in cases of Covid 19. This paper as usual was retracted: <https://www.nature.com/articles/s41598-021-90189-4>



Is SARS COV 2 the “NOVEL VIRUS” Made in a Lab, is it a BIOWEAPON? Absolutely NOT!

- Dr. Stefan Lanka, a German virologist soundly puts these totally bogus and unfounded claims by saying the following about bio-weapons made in a lab, the same way that Monkeypox is a NOT a new virus, when it is now amply clear that Monkeypox was created as a direct effect of the Covid 19 kill shot we call vaccines. Monkeypox is the body trying to detox itself from the deadly and toxic Covid 19 injections, nothing more.
- To understand why biological weapons in the form of pathogens have never existed in this way and never will, one must know the following:
- With regard to viruses, disease-causing viruses — i.e. a dangerous genetic substance — are, to this day, nothing more than mere theory.
- No scientist in the whole world has ever succeeded in providing tangible proof of such a virus.
- Even if one or the other has ever been awarded the Nobel Prize for alleged proof, their work never stands up to scientific scrutiny.
- Source: <https://truthcomestolight.com/bioweapons-the-myth-of-man-made-pathogens/>



In Conclusion: What Caused People to Get Sick in 2020?

- **What caused the select few who got sick from pneumonia, oxygen deprivation and not being able to breathe, lung scarring etc.? HINT: IT WAS NOT A VIRUS OR SNAKE VENOM PEPTIDES!**
- 1. Fear: Massive fear mongering by the government, academia, big pharma and media
- Highly poisoned and toxic PCR swab tips and tests
- 2. Oxidative stress in body from various toxins in everyday life
- 3. Sleep deprivation on a chronic and cumulative basis
- 4. Co-morbidities such as diabetes, heart disease, cancer etc. and obesity
- 5. Lack of nutrient dense diet, lack of vital vitamins, minerals, anti oxidants and omega 3's
- 6. Contaminated flu vaccines given in late 2019 and early 2020
- 7. 5G and other chronic and pervasive EMF exposure (please read the book Invisible Rainbow by Arthur Firstenberg to get more info on non ionizing radiation and electricity causing Covid like syndromes)
- 8. Massive deluge of childhood and adult vaccines since the early 1990's: 40+ vaccines and increasing exponentially



Please Read These Following Books to Find Out What Makes us Sick?

- The books that everyone should read in order to find out what TRULY makes us sick. **HINT**: It is NOT a virus, bacteria, fungi or even snake venom as some people claim.
- 1. The Contagion Myth: Dr. Tom Cowan, M.D. (2020)
- 2. The Invisible Rainbow: Arthur Firstenberg (2017)
- 3. What Really Makes You Ill (Why Everything You Thought You Knew About Disease is Wrong): David Parker and Dawn Lester (2019)
- 4. Dissolving Illusions: Disease, Vaccines and the Forgotten History: Dr. Suzanne Humphries, M.D. (2013)