

# Covid-19 and the Falsification of Death Certificates: The CDC's "More Often Than Not" Clause

According to the CDC: "... the rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause [of death] more often than not."

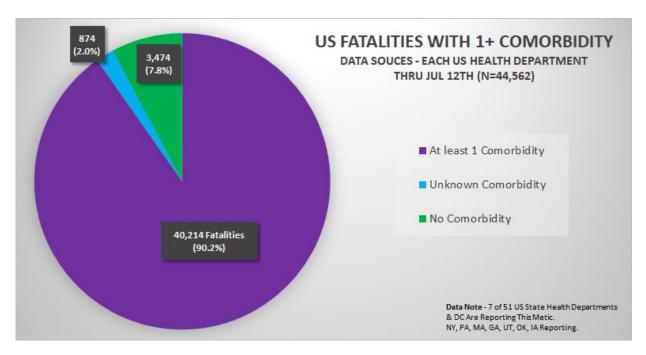
By Prof Michel Chossudovsky

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### Introduction

At the outset of the pandemic, the CDC had been instructed to change the methodology regarding Death Certificates with a view to artificially inflating the numbers of "Covid deaths". According to <u>H. Ealy, M. McEvoy et al</u>

"The 2003 guidelines for establishing death certificates had been cancelled. "Had the CDC used its industry standard, *Medical Examiners' and Coroners' Handbook on Death Registration and Fetal Death Reporting Revision 2003*, as it has for all other causes of death for the last 17 years, the COVID-19 fatality count would be approximately 90.2% lower than it currently is." (Covid-19: Questionable Policies, Manipulated Rules of Data Collection and Reporting. Is It Safe for Students to Return to School? *By H. Ealy, M. McEvoy, and et al.*, August 09, 2020



CDC Deaths Attributed to COVID-19. Comorbidities

A December 2020 CDC report confirms that <u>94% of the deaths attributed to Covid have "comorbidities"</u>, (i.e. deaths dues other causes).

For 6% of the deaths, COVID-19 was the only cause mentioned. For deaths with conditions

or causes in addition to COVID-19, on average, there were 2.6 additional conditions or causes per death. The number of deaths with each condition or cause is shown for all deaths and by age groups.



On March 21, 2020 the following specific guidelines were introduced by the CDC regarding Death Certificates (and their tabulation in the National Vital Statistics System (NVSS)

COVID-19: The "Underlying Cause of Death" and the CDC's "More Often Than Not" Clause

Will <u>COVID-19 be the underlying cause of death?</u> This concept is fundamental.

The underlying cause of death is defined by the WHO as "the disease or injury that initiated the train of events leading directly to death".

What the CDC is recommending with regards to statistical coding and categorization is that COVID-19 is expected to be the underlying cause of death "more often than not."

The CDC combines these two criteria. "underlying cause of death", more often than not.

## Will COVID-19 be the underlying cause of death?

"The underlying cause depends upon what and where conditions are reported on the death certificate. However, the rules for coding and selection of the underlying cause of death are expected to result in COVID- 19 being the underlying cause more often than not."

The above directive is categorical.

Below are CDC concepts and justifications

The Certifier is not allowed to report coronavirus without identifying a specific strain. And the guidelines recommend that COVID-19 must always be indicated.

#### Will COVID-19 be the underlying cause?

The underlying cause depends upon what and where conditions are reported on the death certificate. However, the rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not.

#### What happens if certifiers report terms other than the suggested terms?

If a death certificate reports coronavirus without identifying a specific strain or explicitly specifying that it is not COVID-19, NCHS will ask the states to follow up to verify whether or not the coronavirus was COVID-19. As long as the phrase used indicates the 2019 coronavirus strain, NCHS expects to assign the new code. However, it is preferable and more straightforward for certifiers to use the standard terminology (COVID-19).

(see below): (source CDC)

The certifier cannot depart from the CDC criteria. Covid-19 is imposed. Read carefully the criteria below:

"What happens if certifiers report terms other than the suggested terms?

If a death certificate reports coronavirus without identifying a specific strain or explicitly specifying that it is not COVID-19, NCHS will ask the states to follow up to verify whether or not the coronavirus was COVID-19.

As long as the phrase used indicates the 2019 coronavirus strain, NCHS expects to assign the new code. However, it is preferable and more straightforward for certifiers to use the standard terminology (COVID-19).

What happens if the terms reported on the death certificate indicate uncertainty?

If the death certificate reports terms such as "probable COVID-19" or "likely COVID-19," these terms would be assigned the new ICD code. It Is not likely that NCHS will follow up on these cases.

If "pending COVID-19 testing" is reported on the death certificate, this would be considered a pending record. In this scenario, NCHS would expect to receive an updated record, since the code will likely result in R99. In this case, NCHS will ask the states to follow up to verify if test results confirmed that the decedent had COVID- 19.

... COVID-19 should be reported on the death certificate for all decedents where the disease caused or is assumed to have caused or contributed to death. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc."

There are no loopholes. These CDC directives have contributed to categorizing Covid-19 as the recorded "cause of death". Two fundamental concepts prevail throughout:

The "underlying cause of death"

The "More Often than Not" Clause which falsifies the Cause of Death

And these two criteria are imposed despite the fact that the RT-PCR test used to corroborate the "cause of death" provides misleading and invalid results.

In practice, as outlined above: "probable COVID-19" or "likely COVID-19," will be considered as the cause of death without the conduct of a PCR test and without performing an autopsy.

# Case Study: Flawed "Estimates" of the Cause of Death in Quebec

The criteria establishing the "underlying" Cause of Death in the US are based on "the more often than not" clause (see above) established nationally by the CDC.

In Canada, the criteria differ from one province to another. <u>Categorizing the cause of death in Canada's Province of Quebec</u> has been the object of gross manipulation.

According to a <u>directive from Quebec's Ministry of Health</u> (April 2020):

"If the presumed cause of death is Covid-19 (with or without a positive test) an autopsy should be avoided [emphasis in original document] and death should be attributed to Covid-19 as the probable cause of death. In addition, deaths whose probable cause is Covid-19 are considered natural, and are not subject to a coroner's notice. " (emphasis in the original document).

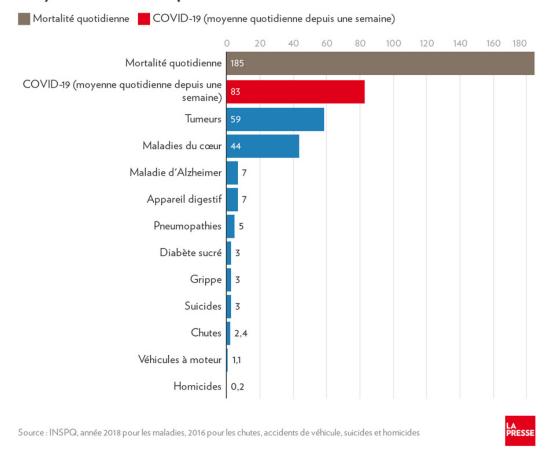
The directive does not allow the counting of co-morbidities. Applied on April 16, 2020, this directive was conducive to an immediate sharp increase in the number of deaths attributed to Covid-19:

44.9% of total deaths in Quebec were attributed to Covid-19 (week of 11-18 April 2020) (see table below).

According to Montreal's *La Presse*, "April [2020] was the deadliest month". But did *La Presse* consult the directives of the Ministry of Health:

Below are the (daily) causes of death for Quebec corresponding to the week of April 12 to 18, 2020 (immediately following the government directive) measured according to the criteria issued by the Ministry of Health.

# Moyenne des décès quotidiens au Québec



Are these figures the result of the so-called deadly pandemic? Or are they the result of the Ministry of Health's "guidelines" based on erroneous criteria?

- "presumed" case pertaining to Covid,
- "With or without a positive test",
- "probable" cause of death,
- "Autopsy should be avoided" in the case of Covid-19.
- " Deaths of which the probable cause is Covid-19, are considered natural, and are not the object of a notice to the coroner "

According to Mr. Paul G. Brunet, of the Council for the protection of the sick (CPM):

"... We realized through the denunciations by some of the doctors that people did not die from COVID, but from dehydration, malnutrition, abandonment, laments Mr. Brunet. So what did the thousands of people in CHSLDs [old persons nursing homes] and private residences really die of?" (quoted in La Presse, translated from French)

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The above text is an excerpt from Chapter III of Michel Chossudovsky's E Book entitled.

#### Click link below

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