

# Delta Variants, PCR Tests, Isolation of the Virus: A Deliberate Worldwide Operation in “Cognitive Dissonance”

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Global Research, August 12, 2021

Theme: [Police State & Civil Rights](#), [Science and Medicine](#)

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*To paraphrase a famous quip from then Presidential candidate Bill Clinton in a debate with his Republican opponent in 1992, “It’s the vaccine, stupid!” The daily mainstream media and government narrative we are being inundated all over the world with is confusing to most, to put it mildly. So-called Delta or “Indian” variant is spreading like chicken pox we are told, but not what that “spreading” means. Unvaccinated are accused of spreading COVID-19 to those supposedly vaccinated. The USA, UK and EU are leading this confusing and deadly narrative.*

Children are told by political appointees to get the jab despite official recommendation from WHO and national medical authorities such as STIKO in Germany to wait. PCR tests that define policy, but which do not tell anything about a person’s having a specific virus, are treated as a “Gold Standard” of infection.

Yet as of this writing not one lab has successfully isolated purified samples of the alleged SARS-CoV-2 virus said to cause the COVID-19 disease.

How can PCR tests be calibrated if the claimed pathogen is not clear?

If we take a step back it becomes clear that we are being subjected to a deliberate worldwide operation in cognitive dissonance whose intended consequences for the future of our civilization are not being told to us.

Resolving dissonance

Cognitive dissonance is a term in psychology for a person’s experience of two contradictory or inconsistent experiences whose inconsistency causes them great stress. The stress is resolved in the brain by the person playing unconscious tricks to resolve the contradiction. The Stockholm Syndrome comes to mind. In this case it is the traditional trust in Authority—governments, WHO, CDC, RKI, Bill Gates and other self-appointed epidemiological experts, in many cases with no medical degree. These authorities are imposing draconian lockdowns, masking and travel restraints and what is rapidly becoming

de facto forced vaccination with untested jabs whose adverse effects now number in the millions in the EU and USA.

The ordinary brain says, "Why would the authorities want to harm us? Don't they want the best for us and the country or the world?"

The real experiences of the past 18 months since the World Health Organization declared a pandemic over an alleged virus first proclaimed in Wuhan China suggest that either politicians and health officials across the world have lost their minds, are deliberately evil, or willfully destructive or simply corrupt.

To resolve that frightening contradiction, millions of us take an experimental concoction known as mRNA genetically-edited substance assuming then they are protected against infection or severe illness from an alleged deadly pathogen called COVID-19.

Some even attack those around them who view the dissonance differently and who refuse a vaccine out of distrust and caution. Yet even the ever-present Dr. Fauci in Washington admits the novel mRNA vaccines do not prevent getting the alleged disease or being infectious, only maybe helps lessen its impact. That is not a vaccine, but rather something else.

Delta Variant?

At this point it is useful to look at several demonstrated facts around this coronavirus and its apparently unlimited "variants." The current scare in the UK and EU as well as the USA is a so-called Delta variant of the coronavirus. The only problem is that we are not being told by the relevant authorities anything useful about that variant.

Since the alleged Delta variant of an alleged but nowhere scientifically proven Wuhan novel coronavirus is being used to justify a new round of draconian lockdowns and pressure to vaccinate, it is worth looking into the test to determine if a Delta variant is present in a tested person tested with the standard WHO-recommended PCR test.

The Delta Variant back in May was originally called the Indian variant.

It was soon blamed for up to 90% of new COVID-19 positive tests in the UK, which also has a significant Indian population. What is not being told is that in just two months the alleged Delta positives in India dropped dramatically from 400,000 daily in May to 40,000 in July. Symptoms were said to be suspiciously like that for ordinary hay fever, so the WHO quickly renamed it the Delta variant according to the Greek alphabet just to muddy the waters more.

Similar Delta declines came in the UK. "Experts" claimed it was because terrified Indians stayed at home as only a tiny 1-3% of the population had been vaccinated. In UK experts there [claimed](#) it was because so many had been vaccinated that Delta cases plunged. If you get the impression they are just inventing explanations to feed the vaccine narrative, you are not alone.

It gets worse. Virtually no one in the UK, India the EU or the USA who is claimed to have been tested positive for Delta has had a specific Delta variant test as such a direct variant test does not exist. Complex and very costly tests are claimed to exist, but no proof is offered that they are being used to claim such things as "90% of UK cases are Delta..." Labs

around the world simply do the standard, highly inaccurate PCR tests and health authorities declare it is “Delta.” There is no simple test for Delta or any other variant. If that were not true, the CDC or WHO or other health institutes should explain in detail those tests. They haven’t. Ask relevant health “experts” how they prove presence of a Delta variant virus. They cannot. Testing labs in the USA admit that they [do not test](#) for any variants.

### Worthless PCR Tests

Even the PCR test itself is not a test for any virus or disease. The scientist who won a Nobel Prize for inventing the PCR test, Dr. Kary Mullis, went on TV to attack by name NIAID head Tony Fauci as incompetent for claiming the PCR tests could detect any pathogen or disease. It was not designed for that, but rather as a laboratory analytical tool for research. PCR tests cannot determine an acute infection, ongoing infectiousness, [nor actual disease](#). The PCR test is not actually designed to identify active infectious disease, instead, it identifies genetic material, be it partial, alive, or even dead.

A January 21, 2020 published paper by two Germans, Corman and Drosten, was used to create the PCR test immediately adopted by the WHO to be the world standard to detect cases of the novel coronavirus from Wuhan. At that point a mere six persons had been identified having the novel coronavirus. In November 2020 a group of scientific external peers reviewed the Drosten paper and found an incredible number of major scientific flaws as well as brazen conflict of interest by Drosten and colleagues.

The scientists noted the Drosten PCR design and paper suffered from, “numerous technical and scientific errors, including insufficient primer design, a problematic and insufficient RT-qPCR protocol, and the absence of an accurate test validation. Neither the presented test nor the manuscript itself fulfils the requirements for an acceptable scientific publication. Further, serious conflicts of interest of the authors are not mentioned. Finally... a systematic peer review process was either not performed here, or [of problematic poor quality](#).” Yet the Drosten PCR design was immediately recommended by the WHO as the world corona test.

The PCR amplifies genetic material by using cycles of amplification until it reaches what is called Cycle threshold (Ct), the number of amplifications to detect genetic material before the sample becomes worthless. Mullis once said if you amplify by enough cycles you can pretty much find anything in anybody as our bodies carry huge numbers of different viruses and bacteria, most harmless. Even Dr. Fauci in a 2020 interviews stated that a CT at 35 or above is worthless. Yet the CDC is believed to recommend testing labs to use a CT of 37 to 40! At that level perhaps 97% of COVID positives [are likely false](#).

Neither the CDC nor the WHO makes public their Ct recommendations, but reports are that the CDC now recommends a lower Ct threshold for testing vaccinated so as to minimize COVID positives in the vaccinated, while [recommending](#) a Ct above 35 for the unvaccinated, a criminal manipulation if it is true.

For those interested in the evolution of perverting the PCR tests to supposedly diagnose specific presence of a disease, look into the sordid history beginning in the 1980s of Fauci and his underling then, Dr Robert Gallo, at NIAID, using Mullis’ PCR technology to wrongly claim a person is HIV-positive, a criminal enterprise that resulted in unnecessary deaths of tens or hundreds of [thousands of people](#).

Notably nearly every prominent COVID vaccine advocate from Fauci to WHO head Tedros

have come out of the HIV/AIDS swamp and its fake PCR testing.

The entire panic measures imposed since 2020 around the world are based on the false premise that “Positive” RT-PCR test means being sick or infected with COVID.

The COVID-19 scare that emanated from Wuhan, China in December of 2019 is a pandemic of testing as many doctors have pointed out. There is no proof that a pathogenic virus is being detected by the test. Nor is there a proven reference value, or “gold standard” to determine positive. It is purely arbitrary. Do the research and you will find it.

### Pushing Experimental Vaccines

If it is the case that we have destroyed trillions of dollars in the world economy since early 2020 and ruined countless lives based on worthless PCR tests and now the same fraud extends the insanity for an alleged Delta variant, the clear conclusion is that some very influential actors are using that fear to drive experimental genetic vaccines never before tested on humans nor extensively on animals.

Yet the vaccine-related official death toll in the EU and USA continue to break records. As of this writing, according to the official EU database for recording vaccine injuries, EudraVigilance, by August 2 a total of 20,595 deaths had been reported of people who previously received the experimental genetic mRNA jabs! Such numbers have never before been seen. In addition there have been [reported](#) 1,960,607 injuries and 50% of them serious including blood clots, heart attacks, menstrual irregularities, paralysis, all following COVID-19 mRNA injections. The USA data at the CDC VAERS database is being manipulated openly, but even they show more than 11,000 post-mRNA vaccine deaths. The major news media never mention this.

Authorities and politicians reply that there is no evidence the deaths or injuries were vaccine related. But they cannot prove that they were not because they prohibit doctors from doing any autopsy. If we are told to follow science, why are doctors being told by health officials to not do autopsies on patients who died AFTER receiving two mRNA vaccines? After thousands of vaccine-related deaths only one autopsy has been reported, that in Germany, and the findings were horrific. The mRNA spike protein [had spread](#) through the entire body. The CDC stopped monitoring non-severe COVID-19 cases among vaccinated people in May. That hides the alarming number of vaccinated who get seriously ill.

Something is terribly wrong when respected experienced medical experts are being banned for suggesting alternative hypotheses to the entire COVID drama. When other scientists adhering to the official line call for any criticism of Tony Fauci or other mainstream COVID doctors, they are to be labelled as doing a “Hate Crime.” Or when cheap and proven remedies are prohibited in favor of the costly deadly mRNA vaccines in which Fauci’s NIAID holds a financial interest.

Already vaccine advocates such as Fauci are speaking of the need for booster mRNA shots and warning of yet a new “Lambda variant” looming.

How will they test for that?

Or are we to take it on faith because he or she is said by CNN or BBC to be a “respected authority”?

How far will sane citizens allow this cognitive dissonance to destroy our lives?

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## Seeds of Destruction: Hidden Agenda of Genetic Manipulation

Author Name: F. William Engdahl

ISBN Number: 978-0-937147-2-2

Year: 2007

Pages: 341 pages with complete index

List Price: ~~\$25.95~~

Special Price: \$18.00

This skilfully researched book focuses on how a small socio-political American elite seeks to establish control over the very basis of human survival: the provision of our daily bread. "Control the food and you control the people."

This is no ordinary book about the perils of GMO. Engdahl takes the reader inside the corridors of power, into the backrooms of the science labs, behind closed doors in the corporate boardrooms.

The author cogently reveals a diabolical world of profit-driven political intrigue, government corruption and coercion, where genetic manipulation and the patenting of life forms are used to gain worldwide control over food production. If the book often reads as a crime story, that should come as no surprise. For that is what it is.

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