

A Letter to My Classmates on Covid-19: "Our Entire Social Fabric is Torn Apart"

By <u>Dr. Naimul Karim</u> Global Research, September 15, 2021 <u>Behind the Curtain</u> 14 September 2021 Region: <u>USA</u> Theme: <u>Media Disinformation</u>, <u>Science and</u> <u>Medicine</u>

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Attached is a letter that I have recently sent to my high school classmates. This is a group with a shared experience spanning more than 50 years. We know each other since our

adolescence – all having attended an elite residential school¹⁾ for six years. Ever since, contacts have been maintained with and within the group.

I sent the letter after realizing that they have excluded me from the next reunion, the decision having been taken behind my back. Historically I have rarely participated in such events. But this time, I have been expressing my interest to attend – primary because the planned reunion location is close to where my mother lives.

I have edited the original version of the letter a bit to provide some context for readers outside of the original recipient group. I have also added a few reference links.

At this stage in my life, time is precious, and life is good. Why then bother with such unpleasant matter? For two reasons. First, this incidence is a microcosm of what is happening in the larger society. It reveals how our entire social fabric is being torn apart.

And the second one is the memory of pastor Martin Niemöller.²Today, a significant majority of Americans consider any questioning of the narrative coming from the government and the legacy media as heresy, even if the questioning is supported by factual arguments. What happens next is generally as follows:

- Instead of trying to understand the questions, or having a civil discussion, the majority immediately assigns certain labels to the questioner – conspiracy theorist, XYZ-denier, Trump supporter, Querdenker, etc.
- If the questioning is done on social media, then those questions arcensored, ultimately leading to deplatforming of the questioner
- If it is done within a physical social group (friends, neighbors, colleagues, even family) then, here too, there is rarely a factual discussion, and the outcome is the same. But the process is different. It all starts rather innocuously enough.

There is a quick exchange of glances, a faint smile or subtle turn of the eyes shared among the other members of the group, acknowledging that something is not quite right with the questioner. If the questioner persists, it only goes downhill from there all the way to an exclusion from the group.

In my specific case, it all begun about 9 months ago when I had started raising questions about inconsistency and illogic of many things about the Covid-19 pandemic that were being told by the government, health authorities and the legacy media. I did so within a closed WhatsApp group for our classmates only. I have no social media presence. I also put up a blog on my personal website listing the inconsistencies. Back then, at the earlier stage of the pandemic, I was mostly guided by gut feel, coupled with scientific rationale, and some initial scientific data. BTW, when I review the earlier post today, I am amazed how correct my gut feel was!

Anyway, back then I had concluded that considering the incomplete nature of the available safety and efficacy data, and my risk profile, it would be wiser for me to wait with vaccination until confirmed data become available. Although my conclusion included a clear proviso that what is right for me may not be right for everyone, my conclusion did not sit well with my classmates. Remember, at that time, vaccine promotion by the government, the health authorities, and the legacy media was already in full swing. On further questioning on my part, I was accused of "confirmation bias" but was provided no examples. At that point I left the WhatsApp group but kept in touch with them by other means.

Then came the preparation for a reunion. This is the genesis of the letter to my classmates

Dear classmates,

I found out that I have been excluded from the upcoming reunion. Fine – I haven't attended many of them anyway. Annually wallowing in memories of adolescent mischiefs is not my cup of tea anyway. But as the subgroup was making the decision behind my back, (yes, there always is such a subgroup), I wish that at least one person from that subgroup had the

decency to inform me. There goes six years of education at our elite high school¹⁾ down the drain....

I assume that I was excluded from the event to protect other attendees from Covid-19. What stupidity! Obviously, you continue to uncritically consume misinformation, half-truths and lies spread by the government and the legacy media. I know you are shocked by my strong statement. After all, none of them have ever lied, right?

If you were not blinded by the propaganda, then you'd realize that your greatest risk of getting infected with SARS-Cov-2 comes not from an unvaccinated person but from a

symptomatic person - irrespective of that person's vaccination status (see here³⁾ and

here4⁴⁾). Interestingly, a recent study finds that some "vaccinated" persons can carry a delta variant viral load that is more than 200 times higher (than that of an unvaccinated person) before becoming symptomatic. If that is true, then maybe you should keep your distance from "vaccinated" persons instead?

Or is it that you are trying to protect me? That, of course, is none of your business. As long I don't endanger others (see last paragraph), then please leave it up to me to decide what risks I take in life. This holds true for every adult. But if you are still in the business of protecting responsible adults (on their behalf), then how about excluding those with multiple comorbidities and/or a weakened immune system?

If you could think clearly, then the proper plan at the reunion would be to (a) primarily do outdoor activities, (b) have good ventilation by opening doors and windows, when you have indoor activities, (c) check everyone's symptoms regularly, (d) wash hands frequently, etc.

BTW, I have been jabbed once, which is obviously not good enough. Just curious what your requirement will be for the next group event. 1 booster or 2? And for the subsequent one? 3 or 4 boosters? Or will it be an IV drip constantly pumping the "vaccine" in your body? When something doesn't work as promised, do you always double down on it? Do you really think that the more the better, especially for an experimental drug based on an unproven technology?

But I am not so naïve to think that protecting me/you was the primary reason for my exclusion. If that were so, then at least one of the powerful decision-makers would have asked me about my vaccination status, and possibly asked about my willingness to take a second one. No, my crime was much more serious – that of Thought Crime. I question the truthfulness of government and legacy media. I also do not blindly trust unsubstantiated claims by big pharma, like Pfizer, which was recently fined almost \$3B for fraudulent claims. Such crimes are inexcusable.

Now let's consider a few examples that demonstrate your immense capacity to be gullible. Despite what you are told

- Strictly speaking, the jabs are not vaccines these are experimental gene therapies made with experimental technologies. That's why the quotation marks around these "vaccines". The relevant technologies were developed for cancer treatment but were abandoned due to clinical failure. None of the "vaccines" have completed clinical study. Pfizer will be the first one to complete it in 2023! All of them have skipped animal study and therefore, none of them have toxicokinetic data.
- The "vaccines" have questionable efficacy. The originally claimed 90+% referred to relative efficacy and not the more relevant absolute efficacy. Besides, proper efficacy could not have been determined anyway because of the extremely shortened study protocol. See how they have now moved the goal post to claim "reduced severity of symptoms"? Reduced symptoms is not a bad thing – but what else are they making up as they go along? A lot, which you'd recognize if you did not have blinders on.
- Covid-19 is not an exceptionally fatal disease. Its infection fatality rate in most countries is between 0.1% and 0.5% (the higher number applies to the elderly, institutionalized patients). Neither is it an untreatable disease – provided you don't follow FDA guideline to wait at home until it gets so bad that you have to go the ER. Long Covid is also not a unique Covid-19 phenomena. Other viral infections have similar issues.
- None of the current "vaccines" can stop the infection chain because none provides sterile immunity. Neither do they provide immunity (from getting sick).

The only immunity that is iron clad is that of the "vaccine" manufacturers from getting sued for any harm caused by their experimental gene therapy products.

- Dangerous mutants are more likely to be caused by those who have taken the current "vaccines" vs. by the unvaccinated. You can understand this by drawing an analogy with antibiotics resistant bacteria. They emerge when incomplete and uncontrolled use of antibiotics leave behind some of the bacteria alive. These then become resistant to antibiotics (remember, what doesn't kill you only makes you stronger). Similarly, the current "vaccines" kill only some of the viruses but leave others alive. These surviving viruses mutate to more resistant strains. There is a scientific term for this phenomenon escape mutation (That's why a golden rule of epidemiology is to vaccinate before, instead of during a pandemic). Just as it is laughable to blame antibiotics resistant bacteria on those who have never used antibiotics, it is laughable to blame the more resistant Covid mutations on those who have not been "vaccinated". This doesn't change even if Fauci says otherwise. He used to be a scientist but has long turned into a politician.
- The Pfizer "vaccine" has not been recently approved by the FDA⁵. Instead, FDA has issued two simultaneous letters in one of them the EUA of the current Pfizer vaccine was extended, and in the other, a vaccine called "Comirnaty" was approved. Both are from BioNTech, and are manufactured and marketed by Pfizer. The approved "vaccine" Comirnaty is not yet available in the USA.
- Naturally obtained immunity is much stronger and longer lasting than one obtained by getting one of the currently available "vaccines". That's because the former relies on additional mechanisms than just antibodi
- The PCR test can determine neither infection, nor infectiousness. The test method has neither been standardized, nor validated. It certainly cannot determine a "Covid case" because it has never been approved as a diagnostic device, and because only a clinician can determine a "case" (with the help of some diagnostic test, if needed). And yet, PCR test positives are being misrepresented as "cases" – primarily to scare people with large "case" numbers to justify unjustifiable and harmful blunt pandemic measures

I could go on with more examples but will stop here. I had considered most of you to be smart enough to recognize so many inconsistencies, even without my help. But either I was wrong about you, or Mark Twain was right when he said, "It is easier to fool people than to make them concede that they have been fooled".

But I digress. In case your mind is drifting towards the response I typically on similar discussions, then here are a few hints: I am not a Trump supporter, I am not a Covid denier, and I am not an antivaxxer. Just last month I got my Pneumovax 23 against pneumonia.

Going back to our health authorities, do you know that about 80% of both FDA and WHO budgets come from private entities directly or indirectly linked to big pharma? Do you know that several years ago WHO had changed the definition of a pandemic to exclude mortality as a criterion⁶⁾? Do you know that late 2020, WHO had changed its statement on herd immunity to remove the role of natural immunity (version from June 2020⁷⁾ vs. version from

Dec. 2020⁸⁾? Do you know that pharma and health products groups together are by far the largest lobby group in the USA.? Unfortunately, many peer reviewed medical journals are increasingly financially dependent on big pharma as well because preprints make a huge

chunk of their revenue. These are not direct evidence of collusion – but let us not be naïve about human nature.

Then there is the issue of medical experimentation on humans. Administration of an experimental drug (which all three "vaccines" are) without Informed Consent violates both Nuremberg Code (1947) and the Declaration of Helsinki (1964). Both were instituted to prevent horrors committed by the Nazi regime on prisoners – think Dr. Mengele. When you got your shot, did any doctor tell you that clinical studies for the vaccine are not complete yet? Did he explain the known and possible adverse effects? If not, then you have been subjects of human experimentation!

I am not a legal expert. But I have many years of professional experience in developing medical products and devices that required clinical studies. In every case, we had to strictly abide by the above two conventions – even for the simplest, and apparently most benign, human clinical studies.

BTW, If Covid-19 is such a dangerous disease, don't you find it odd that even after 18 months, the health authorities haven't come up with any early treatment or prophylaxis recommendations? Does resting at home, drinking a lot of water, taking aspirin as needed, checking temperature, etc., and going to the ER if symptoms become severe look like sound advice to you for such a dangerous disease? And while many clinicians are claiming that they can reduce Covid-19 complications and hospitalization by 80+% by using existing safe medications, FDA ia doing everything in its power to shut such voices down.

I am not partial to any individual early treatment medication for Covid-19 because any severe disease requires a regimen of therapeutics. But I will give an example with

*Ivermectin to show FDA's shameful and deceptive, if not criminal, behavior. FDA's website*⁹⁾ suggests that dumb people are overdosing themselves with a horse medicine, thanks to misinformation from some clinicians. First of all, Ivermectin, like many many other human medicines, is also produced for animal treatment. Ivermectin has been in use for almost 40 years to treat humans – in fact, so successfully that two of its inventors were awarded the Medicine Nobel Prize in 2015. A medicine Nobel prize for a horse medicine, right? Not a single proponent of Ivermectin has ever suggested that anyone takes the animal version of the medication. So, what FDA is spreading on its website is a perfect example of someone pointing finger at another person while three fingers are pointed at himself! Then the only reason why some people are overdosing themselves with an animal version of Ivermectin is that FDA has made it extremely difficult for physicians to prescribe, and pharmacies to sell Ivermectin. BTW, Ivermectin is one of the safest medicines, based on a track record of almost 4 billion doses prescribed.

On its website FDA also mentions that it has not yet reviewed clinical data that many clinician groups have been providing for review since more than a year now. Why not? I'll provide you with some additional dots beyond the ones I have already mentioned earlier: emergency use authorization (EUA) for the "vaccines" would not have been possible if there were any treatment available for the disease; Pfizer's revenue from its Covid-19 "vaccine" already exceeds \$30B+; all vaccine companies have been given complete immunity from any lawsuit concerning harms from these "vaccines"; etc. Now you may choose to connect the dots or not.

Do you remember how within months of the pandemic we were told that we can go back to normal only after sufficient number of the population will be vaccinated – with a vaccine that

was not even available? Do you know that until then it took 8-10 years for any vaccine to be developed? From the very beginning, the pandemic measures have in reality been vaccination measures. There is a big difference between the two. As a result, there has been no overall cost benefit analysis. – as if huge costs related to the economy, collateral health and psychological damages, disruption of the civil society, children's education, etc. simply do not exist. Our friend Khand**r's health situation is just one example.

Yes, there may be benefits of taking these "vaccines" – for some. I made sure that my mother gets one of the "vaccines". But there is absolutely no medical, rational, ethical, and legal ground either for vaccine mandate or vaccine pass.

Just a few more things. Have you noticed how in 18 months, a two-week lockdown (to flatten the curve) has morphed into "show your papers"? Today F**k Checkers of unknown credential and technical competence decide what eminent scientific and clinical experts, including Nobel laureates, are allowed to share in the public. This is akin to killing science. Science, especially in a developing area, never has one single answer. Asking questions, proposing alternative hypotheses, creating and sharing new data to support or refute the hypotheses are the ways science advances – not by any edict from the Ministry of Truth. Yet, that's exactly what is happening. The Ministry of Truth has outsourced the job to private media corporations. Therefore, good science is one of many victims of this pandemic. If you question the official narrative then you get censored, banned, deplatformed or excluded from a reunion.

It is amazing how otherwise intelligent people are not only fine with all these irrational and harmful measures and policies, but they are even clamoring for more. As if they want to prove both Sheldon Wolin right on his prediction of Inverted Totalitarianism, and George Orwell's vision of the future: "If you want a vision of the future, imagine a boot stamping on a human face – forever".

Life is too short and enjoyable to dwell much on such unpleasant experience. But I had to pen this because my exclusion reminded me of Martin Niemöller, "First they came for the communists...."

Wake the f**k up!

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