

# Is the Virus “Variant” Being Used to Scare People into Getting Vaccinated?

By [Mike Whitney](#)

Global Research, February 25, 2021

Theme: [Media Disinformation](#), [Science and Medicine](#)

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*In a recent front-page article, the New York Times reported that the new mutated version of the Coronavirus was likely to be more contagious or lethal than the original infection. According to the Times, this new iteration of the infection could resist conventional treatments and force lockdown nations to extend the timeline for lifting restrictions. But given that “daily Covid infections have declined by 77 percent since January” and the virus appears to be ‘on its way out’, the report in the Times seems particularly suspicious. Is this new mutation, called the “variant”, really as deadly as it’s cracked up to be or is the media conjuring up another Covid hobgoblin to scare the public into getting vaccinated? Check out this excerpt from the article:*

“British government scientists are increasingly finding the coronavirus variant first detected in Britain to be linked to **a higher risk of death than other versions of the virus, a devastating trend that highlights the serious risks and considerable uncertainties of this new phase of the pandemic.**

The scientists said last month that there was a “realistic possibility” that the variant was **not only more contagious than others, but also more lethal.** Now, they say in a new document that it is “likely” that the variant is linked to an increased risk of hospitalization and death....

The reasons for an elevated death rate are not entirely clear. Some evidence suggests that people infected with the variant may have higher viral loads, a feature that could not only **make the virus more contagious but also potentially undermine the effectiveness of certain treatments.**

But scientists are also trying to understand how much of the **increased risk of death** may stem from **the propensity of the variant to spread very easily** through settings like nursing homes, where people are already vulnerable.

No matter the explanation, scientific advisers to the British government said on Saturday, **the new findings laid bare the dangers of countries easing restrictions as the variant takes hold.”** ([“Covid-19: U.K.-Based Variant Is Probably More Lethal, Scientists Say”](#), New York Times)

We are not going to waste a lot of time on this short blurb, but we will ask people to mull

over the hyperbolic phraseology that's used with the clear intention of terrifying readers. The author makes no effort to point out that there is little or no evidence that the so-called 'variant' has triggered a spike in cases or that it has caused more deaths. Instead, he devotes the entire 5-paragraph segment to spreading terror about an issue of which the public knows next to nothing. Why would the author do this?

We see three possible reasons:

1. The author believes he is performing a public service by informing the American people on a matter of grave importance.
2. The author is laying the groundwork for extending the onerous lockdown restrictions.
3. The author wants to scare more people into getting vaccinated.

We think the most likely answer is Number 3, that this article and the thousands others like it are part of a well-funded terror campaign directed at vaccine skeptics who have no intention of getting inoculated for an infection that affects a mere sliver of the population and that appears to be dying out by the day. Why would any reasonable person do that?

But **there's no denying that the variant is now being used to fuel the Covid hysteria and perpetuate the repressive conditions that have been imposed arbitrarily by Democrat governors acting on behalf of powerful oligarchs and climate fabulists.** So, the best way to address this situation is to shed a little light on the topic itself. What we want to do, is present the views of a few respected professionals who have no ax to grind and who have a good grasp of the science. That way, readers can decide for themselves whether the Times article has any merit or is just more of the same hyperventilating drivel they regurgitate every day. First, check out this video interview with Sunetra Gupta, who is Professor of Theoretical Epidemiology in the Department of Zoology at the University of Oxford, and a Royal Society Wolfson Research Fellow. Here's what she said:

"It may well be that some of these variants are more transmissible, but the truth is, that within a system where you have a lot of immunity shared, ...what you tend to get is competitive exclusion so that the infection with the highest Reproductive rate wins. What that means is that **even with a marginal increase in transmissibility**, that could see a new variant sweep through. But **that does not have much of a material effect or difference in how we deal with the virus. In other words, the surge of the virus cannot be ascribed to a new variant....**

The other question is **are these variants more virulent, and the truth is we don't know, but it is unlikely because the data don't seem to say so despite the scary headlines...Pathogens tend to evolve towards lower virulence....because that maximizes their transmissibility...**It is much more probable that these strains will not be materially so different that we would have to alter our policies." ([Sunetra Gupta: Are these new variants more transmissible?](#) You Tube)

Repeat: **"Pathogens tend to evolve towards lower virulence"**

What Gupta means is that- as the number of susceptible hosts dwindles- the strain that best adapts to that new situation, is the one that will dominate. That does not mean that it

will become more contagious or lethal; quite the contrary, as Gupta points out, **these infections tend to weaken over time, not get stronger or more deadly.** But, why?

Because the number of people who are capable of contracting Covid is shrinking all the time. **Remember, the virus has already ripped through the population twice, which means the pool of potential hosts has shrunk dramatically. So, whether the new variants are modestly different or not, the number of cases, hospitalizations and fatalities will continue to fall.** Infections do not have an infinite life span nor is the variant a new or novel virus. It is a slight variation of the original pathogen which means the virus is on its way out.

Notice how this analysis conflicts with the fearmongering of the article in the Times. We are trying to explain what a variant is, while the Times is trying to use the fear of a sinister and invisible pathogen to coerce a certain behavior, in this case, getting vaccinated. Our explanation is an appeal to one's sense of reason and judgement, while the other is a manipulation of one's darkest emotions and fear of death. Which do you prefer?

Here's more on the topic from Diagnostic pathologist, Dr Claire Craig who provides a more technical explanation:

**"SARS-CoV-2 genetic sequence has ~30,000 letters. Alterations in a handful of letters will not change it's shape much - if it did it wouldn't function properly anyway. Fear mongering about immune escape is not needed** and is irresponsible esp when no evidence to support the claims."  
([Claire Craig](#))

In essence, Craig is saying the same thing we said earlier, that the slight mutations to the infection will not impact the immune reaction of people who already had the virus. Thus, the current crop of "variants" should not be a cause for alarm. If you have already had Covid or if you already have prior-immunity due to previous exposure to similar infections, (SARS, for example) the new strain should not be a problem.

Here's a longer explanation that some readers might find overly technical and perhaps tedious, but it's worth wading through in order to see that **the media is deliberately misstating the science to terrify the public.** This excerpt is from an article by Michael Yeadon, ex-Pfizer Vice President of allergy and respiratory research. Here's what he said:

**"The idea is planted in people's mind that this virus is mutating in such a way as to evade prior immunity. This is completely unfounded,** certainly as regards immunity..(that is) gained naturally, after repelling the virus ....

It's important to appreciate that upon infection, the human immune system cuts up an infectious agent into short pieces. Each of these short pieces of protein are presented to other cells in the immune system, like an identity parade. Our cells have a truly astonishing range of abilities to recognize different protein structures, and there will be some which recognize each of the pieces of the invader. The cells which recognize a piece are instructed to multiply selectively so that, after a few days to a couple of weeks, our bodies contain large numbers of virus piece specific cells. These have a range of functions. Some make antibodies & others are programmed to kill cells infected by the virus, recognized by displaying on their surface signals that tell the body that they've been invaded.

**In almost all cases,... this smart adaptive system overcomes the infection. Crucially... this event leaves you with many different kinds of long-lived 'memory' cells which, if you're infected again, rapidly wipe out any attempt at reinfection. So, you won't again be made ill by the same virus, and because the virus is simply not permitted to replicate, you are also no longer able to participate in transmission.**

### **To mutations & variants.**

Many viruses are error-prone when they replicate in your cells. They make "typos" so the virus which results is slightly different from the parent virus. Sometimes that small changes make no difference to the behavior of the virus. Other times, the change renders the virus incapable of something important to its survival. It's possible a change makes it slightly better at surviving and so over time, it becomes a higher proportion of viruses sequenced from clinical samples. **The general 'direction of travel' is to become less injurious but easier to transmit, eventually joining the other 40 or so viruses which cause what we collectively term 'the common cold'.**

**What generally doesn't happen is for mutants to become more lethal to the hosts (us). But the key point I wanted to get across is just how large SARS-COV-2 is. I recall it's of the order of 30,000 letters of genetic code which, when translated, make around 10,000 amino acids in several viral proteins. Now you can see that the kinds of numbers of changes in the letters of the genetic code are truly tiny in comparison with the whole. 30 letter changes might be roughly 0.1% of the virus's code. In other words, 99.9% of that code is not different from the so-called Wuhan strain.** Similarly, the changes in the protein translated from those letter code alterations are overwhelmed by the vast majority of the unchanged protein sequences. So **your immune system, recognizing as it does perhaps dozens of short pieces.... will not be fooled by a couple of small changes to a tiny fraction of these. No: your immune system knows immediately that this is an invader it's seen before, and has no difficulty whatsoever in dealing with it swiftly & without symptoms.** So, it's a scientifically invalid...

... even if mutations did change a couple of these, the majority of the pieces.... of the mutated virus will still be unchanged & recognized by the vaccine-immune system or the virus-infected immune system & a prompt, vigorous response will still protect you. ..

I do have to urge you to do is do a little research of your own to test whether what...the Govt is telling you marries up with the pre-2020 scientific literature & official guidance.... or whether it doesn't. **If you find one occasion where what you're being told runs directly contrary to pre-2020 science & guidance, congratulations! You've discovered that you're being misled & lied to.**"(["Variants, Covid"](#), Michael Yeadon, My Thread Reader)

While Yeadon's explanation is much longer than Dr Craig's, their views on the variant appear to be identical. Finally, there's this, from an article by Rosemary Frei at the Off Guardian:

**"It turns out that the case for the variants' contagiousness and dangerousness centers largely on the theoretical effects of just one change said to stem from a mutation in the virus's genes. And, as I'll show in this article, that case is very shaky....**

Public-health officials, politicians and the mainstream media around the world

turned their collective headlights on the variants right after the publication of three theoretical-modeling papers on B.1.1.7, a variant originating in the U.K. The first was a Technical Briefing by Public Health England published Dec. 21 ..., the second a paper published Dec. 23 by a mathematical-modeling group at the London School of Hygiene and Tropical Medicine, and the third a theoretical-modeling manuscript posted Dec. 31 by a large group of UK scientists.

**The main evidence that the top three theoretical-models cite as proof of stronger bonding between the N501Y form of the novel coronavirus and the RBD is from just three scientific manuscripts, and these describe experiments with the virus in mice or petri dishes, not observation of whether in fact the variants are truly more contagious or more deadly... None of the three papers was checked over for accuracy by objective observers - a process called 'peer review.' Nonetheless, all three were portrayed as solid science by many scientists, politicians, public-health officials and the press.**

**The authors of that paper themselves conclude that:**

**this result should be interpreted with caution.** As a limited number of samples with the S-negative profile [i.e., tests that were positive for two of the three portions of the PCR test but not for the third, S-gene, portion] were sequenced, we could not exclude the presence of other S mutations associated with this profile.... Moreover we could not determine whether the deletion affected the primer or other probe-binding region as their coordinates were not available.

It's a good bet that similar sleights of hand are behind the new wave of papers and headlines focusing on the amino-acid change dubbed E484K.... That **the pronouncements about the dire danger posed by the new variants aren't based on solid science... They appear to be aimed more at scaring the public into submitting to harsher and longer restrictions than helping to create truly evidence-based policies.**

So follow the golden rules. Read the primary scientific-paper sources. Analyze them and think for yourself. **Don't let your reasoning be swept away by the 24-7, fear-filled news cycle.**" (["The shaky science behind the "deadly new strains" of Sars-Cov-2"](#), The Off Guardian)

**So the whole "variant" theory is based on 3 or 4 papers that have not been peer reviewed, do not produce solid evidence of their findings, and haven't even been checked for accuracy.** The authors might as well have been writing science fiction and yet, the media and public health experts lap it up and insist that the danger is real. But is it?

No, it's not. **The variant is just the latest in a long list of fear-generating devices that are being used to perpetuate the state of emergency, scare the public into submissive compliance, and coerce the public into injecting themselves with a toxic gene-altering cocktail that could dramatically impact fertility, longevity and survival itself.**

Don't get swept up in the hysteria. The people who are orchestrating this elaborate hoax, do not have your best interests in mind. In fact, they might want to put you in an early grave.

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