

Dérives de la Médecine Occidentale : causes, dégâts

et solutions

par Jean-Dominique MICHEL
Anthropologue de la santé
Expert en santé publique



I. Fraudes et corruption dans le domaine de la santé : un constat généralisé



COMMISSION
EUROPÉENNE

Bruxelles, le 3.2.2014
COM(2014) 38 final

RAPPORT DE LA COMMISSION AU CONSEIL ET AU PARLEMENT EUROPÉEN

Rapport anticorruption de l'UE

Le secteur de la santé, dans lequel la vulnérabilité à la corruption est généralisée, en ce qui concerne notamment les marchés publics et l'industrie pharmaceutique, a donné lieu à une étude plus détaillée dans plusieurs États membres. Ces pays élaborent actuellement des stratégies et des réformes pour tenter de venir à bout de la corruption dans le secteur de la santé. Les résultats tangibles sont toutefois maigres jusqu'à présent. Les commissions occultes et la corruption dans les marchés publics et le secteur pharmaceutique demeurent préoccupants.



Par European Parliament from EU — Ursula von der Leyen presents her vision to MEPs, CC BY 2.0

Partager



A la suite des révélations le 13 janvier de *Politico* (magazine germano-américain destiné aux élites politiques et économiques), le quotidien *Libération* a publié le lendemain une vaste enquête sur l'opacité des contrats d'achat de l'UE de vaccins Pfizer contre le Covid. Ce journal confirme la position chancelante la présidente de la Commission européenne, Ursula von der Leyen, convoquée par la Commission Covid du Parlement européen.

Ce scandale de **corruption** dans l'UE ne fera que s'aggraver, selon PAUL BALDWIN

"La Commission européenne actuelle, dirigée par Ursula von der Leyen, est la Commission européenne la plus corrompue de l'histoire de l'Union européenne."

De PAUL BALDWIN

18:56, Mon, Mar 6, 2023 | MISE À JOUR : 20:01, lun. 6 mars 2023



786



Paul Baldwin comment

L'UE est actuellement assise sur une poudrière, selon Paul Baldwin (Image : Getty)



Michel Jean-Dominique @MicheJeanDomi1 · 14 févr.
Si même les médias mainstream s'y mettent...

Le New York Times poursuit l'UE pour les textes Pfizer de von der Leyen

Les messages pourraient faire la lumière sur des accords pour acheter des milliards d'euros de vaccins COVID-19.



Le journal affrontera des avocats de l'UE devant la plus haute cour du bloc, arguant que la Commission est légalement tenue de publier les messages, qui pourraient contenir des informations sur les accords du bloc pour acheter des milliards d'euros de doses de COVID-19 | Photo PISCINE par Johanna Geron via Getty Images

· AUTRES NEWS · COVID-19 · ENJEUX COLLATERAUX · VACCINS · MÉDIAS

«Ursula von der Pfizer»: Europe1 commente la plainte du New York Times

16 février 2023 · 0 · 519 vues





Valeurs actuelles 🇺🇸 @Valeurs · 9 mars

● Ursula, Bill et Albert, petits arrangements entre amis ?

➔ Opacité entourant les contrats de vaccins contre le Covid entre l'UE et les laboratoires, suspicions de **corruption**: l'étau judiciaire se resserre autour d'Ursula von der Leyen.

✍️ P. de Sagazan



valeursactuelles.com

Ursula, Bill et Albert, petits arrangements entre amis ?

Face à l'opacité entourant les contrats de vaccins contre le Covid passés entre la Commission européenne et les laboratoires ...



Michèle Rivasi   @MicheleRivasi · 14 févr.

Les conflits d'intérêts, le pantouflage, la corruption... Les scandales se multiplient et entachent les institutions européennes. Il est urgent qu'un organe d'éthique indépendant et fort soit créé !



13/09/2022 - COMMUNIQUÉ DE PRESSE

AFFAIRE DES SMS : LA COUR DES COMPTES EUROPÉENNE FUSTIGE LA COMMISSION POUR L'OPACITÉ DES NÉGOCIATIONS DU PLUS GROS CONTRAT D'ACHATS DE VACCINS D'EUROPE

Par Michèle Rivasi, eurodéputée et vice-présidente de la Commission spéciale sur le Covid-19



D'après le rapport de la Cour des comptes européenne récemment publié, la Commission européenne a refusé aux auditeurs de divulguer des détails sur le rôle personnel de la présidente de la Commission européenne, Ursula von der Leyen, dans les pourparlers ayant précédé la conclusion du plus gros contrat d'achats de vaccins de l'Union européenne.

En effet, les auditeurs européens expliquent avoir demandé à la Commission de leur fournir des informations sur les négociations préliminaires de cet accord (experts scientifiques consultés et avis reçus, calendrier des pourparlers, comptes-rendus des discussions et détails des termes et conditions convenus). Pour la première fois, leur demande est restée sans suite.

« Ce n'est pas la première fois que la Commission européenne refuse de divulguer ces informations. Nous sommes nombreux, élus européens, mais aussi les journalistes et la Médiatrice européenne, à exiger l'accès à ces SMS et aux autres documents liés aux négociations des contrats. Rien n'y fait. Nous nous heurtons au même refus catégorique que les auditeurs européens.

C'est la goutte d'eau qui fait déborder la vase. D'ordinaire, la Commission européenne donne toujours accès à l'information demandée par la Cour des comptes, même lorsque les autres institutions n'y ont pas droit. Dans cette affaire des SMS, c'est la première fois qu'elle refuse de transmettre à la Cour les rapports demandés.

Comment est-ce possible ? Peut-être parce que ces comptes-rendus n'existent tout simplement pas. Depuis avril 2021, nous savons que le plus gros contrat d'achats de vaccins de l'Union européenne d'1,8 milliard de doses a été négocié par un échange de SMS entre la présidente de la Commission européenne et le PDG de Pfizer, en dehors de toute pratique établie par l'institution.

Que cachent ces SMS ? Ils contiennent certainement les informations sur le prix - la dose est passée de 15,50 euros à 19,50 euros - et sur d'autres clauses du contrat. Or, tout ceci doit être négocié et justifié par les experts scientifiques et les négociateurs de la Commission. Au-delà de la transparence, c'est la relation plus que gênante d'une haute responsable européenne avec le PDG d'une multinationale américaine, impliquant une trentaine de milliards d'euros d'argent public, qui est inadmissible.

Cette saga ne peut plus durer. Au lieu de respecter le droit et le cadre européen, Ursula von der Leyen est hors-la-loi. Le parquet européen doit se saisir de cette affaire pour restaurer de toute urgence la confiance des citoyens dans les institutions européennes. »

Lire le rapport de la Cour des comptes européenne :
<https://www.eca.europa.eu/fr/Pages/DocItem.aspx?did=61899>



Philippe Murer 🇫🇷 🇵🇸 @PhilippeMurer · 3 mars

Von der Leyen ne répondra pas de son scandaleux achat de 2 milliards de doses de vaccins Covid avec négo par sms.

Elle est protégée par le Parlement Européen

✅ L'UE est une institution pourrie. Ceux qui vous expliquent qu'on va changer l'UE de l'intérieur se moquent de vous.



Corruption : un coût de près de 1 000 milliards d'euros par an pour l'UE

Par : Louise Rozès Moscovenko | EURACTIV France 📅 19 nov. 2020 (mis à jour: 📅 23 nov. 2020)



Près de 1 000 milliards d'euros. C'est ce que représente l'impact de la corruption à l'échelle européenne, soit 6,3 % du PIB du bloc. [lunopark]

Langues : Deutsch



Alors que le monde s'apprête à connaître l'une des pires récessions économiques de son histoire, les chiffres des coûts de la corruption au sein de l'Union européenne donnent le vertige. Jusqu'à 990 milliards d'euros sont ainsi perdus chaque année, l'équivalent de 6,3 % du PIB de l'UE.

Accueil / Actualités / Société / Santé / Un nouveau rapport dénonce l'influence « démesurée » des Big Pharma sur l'UE

Un nouveau rapport dénonce l'influence « démesurée » des Big Pharma sur l'UE

Par : Clara Bauer-Babef | EURACTIV France ⌚ 7:45 (mis à jour: ⌚ 8:46)



En juin 2020, la Commission européenne passe des contrats avec des laboratoires pharmaceutiques afin de livrer des doses de vaccins contre la Covid-19 aux Etats membres. [wacomka/Shutterstock]



Une influence « démesurée » qui « nuit » à la santé publique. Voilà comment deux ONG spécialisées en santé qualifient, dans leur dernier rapport, la relation entre les laboratoires pharmaceutiques et les institutions européennes.



House of Commons
Health Committee

The Influence of the Pharmaceutical Industry



House of Commons
Health Committee

The Influence of the Pharmaceutical Industry

L'industrie pharmaceutique trahit systématiquement ses responsabilités à l'égard de la population et des

institutions. Les grandes firmes [...] exercent une influence omniprésente et persistante non seulement sur la médecine et la recherche, mais sur les patients, les médias, les

administrations, les agences de régulation et les politiques.

[...] Elle s'est infiltrée dans tout le système, à tous les

niveaux. C'est elle qui définit les programmes et la pratique médicale. **Elle définit aussi les objectifs de recherche de médicaments sur d'autres priorités que celles de la santé publique, uniquement en fonction des marchés qu'elle peut s'ouvrir.** Elle détermine non seulement ce qui est à

rechercher, mais comment le rechercher et surtout comment les résultats en seront interprétés et publiés. Elle est

maintenant hors de tout contrôle. Ses tentacules

s'infiltrent à tous les niveaux. Il faut lui imposer de

THE LANCET

LECTURE | [VOLUME 394, ISSUE 10214, P2119-2124, DECEMBER 07, 2019](#)

Corruption in global health: the open secret

[Patricia J García, MD](#)  

Published: November 27, 2019 • DOI: [https://doi.org/10.1016/S0140-6736\(19\)32527-9](https://doi.org/10.1016/S0140-6736(19)32527-9) •

Summary

Corruption is embedded in health systems. Throughout my life—as a researcher, public health worker, and a Minister of Health—I have been able to see entrenched dishonesty and fraud. But despite being one of the most important barriers to implementing universal health coverage around the world, corruption is rarely openly discussed. In



Healthcare among most corrupt sectors, warns UN expert, backing “citizen whistleblowers”

NEW YORK (24 October 2017) – The United Nations Special Rapporteur on the right to health, Dainius Pūras, has called on States to provide bold leadership to confront corruption and its severe impact on the right to health, including more protection for “whistleblowers” and empowering the public to report corruption.

“In many countries, health is among the most corrupt sectors,” Mr. Pūras told the UN General Assembly in New York, presenting a [report](#) on corruption. “This has significant implications for equality and non-discrimination, since it has a particularly marked impact on the health of populations in

Editorials

Covid-19: politicisation, “corruption,” and suppression of science

BMJ 2020 ; 371 doi: <https://doi.org/10.1136/bmj.m4425> (Published 13 November 2020)

Cite this as: *BMJ* 2020;371:m4425

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Kamran Abbasi, executive editor

Editorials

Covid-19: politicisation, “corruption,” and suppression of science

BMJ 2020 ; 371 doi: <https://doi.org/10.1136/bmj.m4425> (Published 13 November 2020)

Cite this as: *BMJ* 2020;371:m4425

Editorials

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Cite this as: *BMJ* 2020;371:m4425

NEWS 30TH JUL 2015

THE IMPACT OF CORRUPTION IN THE PHARMACEUTICAL AND HEALTHCARE SECTOR ON SOCIETY

PHARMACEUTICAL/

News > World > World Politics

Big Pharma and governments are 'turning a blind eye to corruption', report claims

Transparency International says corruption is making a few rich and wrecking the health of some of the world's poorest people

Adam Lusher • Thursday 02 June 2016 00:12 •  Comments



II. Une corruption systémique



HARVARD UNIVERSITY



EDMOND J. SAFRA
Center for Ethics



Suffolk University
Law School

Legal Studies Research Paper Series
Research Paper 13-25
December 6, 2013

Institutional Corruption and the Pharmaceutical Policy

Marc A. Rodwin

Professor of Law, Suffolk University Law School

Lab Fellow, Edmond J. Safra Center for Ethics at Harvard University

Institutional Corruption and the Pharmaceutical Policy

Journal of Law, Medicine and Ethics, Vol. 41, p. 544, 2013

Suffolk University Law School Research Paper No. 13-25

10 Pages • Posted: 27 Jul 2013 • Last revised: 26 Feb 2014

Marc A. Rodwin

Suffolk University Law School; Harvard University - Edmond J. Safra Center for Ethics

INTRODUCTION

Institutional Corruption and the Pharmaceutical Policy

Marc A. Rodwin

Institutional Corruption of Pharmaceuticals and the Myth of Safe and Effective Drugs

Journal of Law, Medicine and Ethics, 2013, Vol. 14, No. 3: 590-610

11 Pages • Posted: 20 Jun 2013 • Last revised: 11 Apr 2020

[Donald W. Light](#)

Rowan University School of Osteopathic Medicine ; Center for Migration and Development; Institute for Advanced Study

[Joel Lexchin](#)

York University

[Jonathan J. Darrow](#)

Harvard Medical School

Physicians Under the Influence: Social Psychology and Industry Marketing Strategies

Journal of Law, Medicine and Ethics, 2013, 41(3), 665-672

Edmond J. Safra Working Papers

Georgetown McDonough School of Business Research Paper No. 2286433

27 Pages • Posted: 28 Jun 2013 • Last revised: 6 Aug 2014

[Sunita Sah](#)

Johnson Graduate School of Management, Cornell University

[Adriane Fugh-Berman](#)

Georgetown University Medical Center

Physicians Under the Influence: Social Psychology and Industry Marketing Strategies

Journal of Law, Medicine and Ethics, 2013, 41(3), 665-672

Edmond J. Safra Working Papers

Georgetown McDonough School of Business Research Paper No. 2286433

8 Pages • Posted: 28 Jun 2013 • Last revised: 25 Jul 2022

[Sunita Sah](#)

Johnson Graduate School of Management, Cornell University

[Adriane Fugh-Berman](#)

Georgetown University Medical Center

Date Written: April 30, 2013

Abstract

Pharmaceutical and medical device companies apply social psychology to influence physicians' prescribing behavior and decision-making. Physicians fail to recognize their vulnerability to commercial influences; due to self-serving bias, rationalization, and cognitive dissonance. Professionalism offers little protection; even the most conscious and genuine commitment to ethical behavior cannot eliminate unintentional, subconscious bias. Six principles of influence — reciprocity, commitment, social proof, liking, authority, and scarcity — are key to the industry's routine marketing strategies, which rely on the illusion that the industry is a generous avuncular partner to physicians. In order to resist industry influence, physicians must accept that they are vulnerable to subconscious bias, and have both the motivation and means to resist industry influence. A culture in which accepting industry gifts engenders shame, rather than gratitude, will reduce conflicts of interest. If greater academic prestige accrues to distant, rather than close relationships with

Richard Smith: Time for science to be about truth rather than careers

September 9, 2013

Richard Smith

Most scientific studies are wrong, and they are wrong because scientists are interested in funding and careers rather than truth.



26



That was the chilling message delivered by the smiling, brilliant, erudite, and cuddly John Ioannidis at the Seventh Peer Review Congress in Chicago this week. Listening to somebody as brilliant as Ioannidis is like listening to a great opera or watching a gripping football match: you feel inspired, uplifted, and privileged. And, although I would never describe a female speaker as cuddly (no matter how cuddly she might be), I write this about Ioannidis because it felt good to see such brilliance worn so lightly and attractively.

His report "[Why most published research findings are false](#)" is the most cited paper in *PLOS Medicine* and has contributed to him being profiled in the *New York Times* and becoming famous.

III. Une industrie mafieuse et hors de contrôle

PETER C. GØTZSCHE, M.D.

Traduction de **FERNAND TURCOTTE**, M.D.

En collaboration avec **PIERRE BIRON**

REMÈDES MORTELS ET CRIME ORGANISÉ

Comment l'industrie pharmaceutique
a corrompu les services de santé




A propos



Presses de l'Université Laval

Éditeur depuis 1950

« Tout m'intéresse, tout m'étonne. » - Montesquieu

« Cet ouvrage va provoquer un orage, car il apporte des preuves détaillées démontrant que le pouvoir d'intimidation de l'industrie pharmaceutique est colossal, ce qui explique la gravité des dégâts infligés partout. » Fernand Turcotte, médecin et traducteur

Description

Dans cet ouvrage révolutionnaire, Peter C. Gøtzsche lève le voile sur les comportements frauduleux de l'industrie pharmaceutique dans les domaines de la recherche et de la commercialisation et sur son mépris moralement répugnant pour la vie humaine. L'auteur établit des rapprochements convaincants entre l'industrie pharmaceutique et l'industrie du tabac et révèle l'extraordinaire vérité derrière les efforts déployés pour semer la confusion et détourner l'attention du public et des politiciens.

Le livre du Dr Gøtzsche a remporté le premier prix dans la catégorie « Basis of Medicine » en 2014 présenté par la British Medical Association. Il a également reçu un prix de la Société internationale de psychologie éthique et psychiatrie.

Richard Smith: Is the pharmaceutical industry like the mafia?

September 10, 2013

Richard Smith

The piece that follows is my foreword to a new and fascinating book by Peter Gøtzsche, the head of the Nordic Cochrane Centre, entitled *Deadly Medicines and Organised Crime: How Big Pharma Has Corrupted Healthcare*. I hope that this piece might prompt you to read the book. I was not paid for my foreword and will not receive any payment from the book.



There must be plenty of people who shudder when they hear that Peter Gøtzsche will be speaking at a meeting or see his name on the contents list of a journal. He is like the young boy who not only could see that the emperor had no clothes but also said so. Most of us either cannot see that the emperor is naked or will not announce it when we see his nakedness, which is why we badly need people like Peter. He is not a compromiser or a dissembler, and he has a taste for strong, blunt language and colourful metaphors. Some, perhaps many, people might be put off reading this book by Peter's insistence on comparing the pharmaceutical industry to the mob, but those who turn away from the book will miss an important opportunity to understand something important about the world—and to be shocked.

Violation Tracker Industry Summary Page

Industry: pharmaceuticals

Penalty Total since 2000: \$95,640,438,163

Number of Records: 1,042

Note: The totals include only those entries matched to a parent company. The industry designation is the primary one for the parent's operations overall. The totals are adjusted to account for the fact that each parent's entries may include both agency records and settlement announcements for the same case; or else a penalty covering multiple locations may be listed in the individual records for each of the facilities. They are also adjusted to reflect cases in which federal and state or local agencies cooperated and issued separate announcements of the outcome. Duplicate or overlapping penalty amounts are marked with an asterisk in the individual records list below.

TOP 10 CURRENT PARENT COMPANIES	TOTAL PENALTY \$	NUMBER OF RECORDS
Johnson & Johnson	\$15,008,224,699	74
Merck	\$10,467,160,581	81
Pfizer	\$10,268,623,165	90
Purdue Pharma	\$9,262,372,787	10
GlaxoSmithKline	\$8,739,033,406	39
Teva Pharmaceutical Industries	\$8,369,931,071	72

Violation Tracker Current Parent Company Summary

Current Parent Company Name: Pfizer

Ownership Structure: publicly traded (ticker symbol PFE)

Headquartered in: New York

Major Industry: pharmaceuticals

Specific Industry: pharmaceuticals

Penalty total since 2000: \$10,268,623,165

Number of records: 90

TOP 5 OFFENSE GROUPS (GROUPS DEFINED)	PENALTY TOTAL	NUMBER OF RECORDS
safety-related offenses	\$5,637,014,255	15
healthcare-related offenses	\$3,373,675,000	10
government-contracting-related offenses	\$1,148,191,225	20
competition-related offenses	\$98,166,568	8
environment-related offenses	\$5,629,098	26

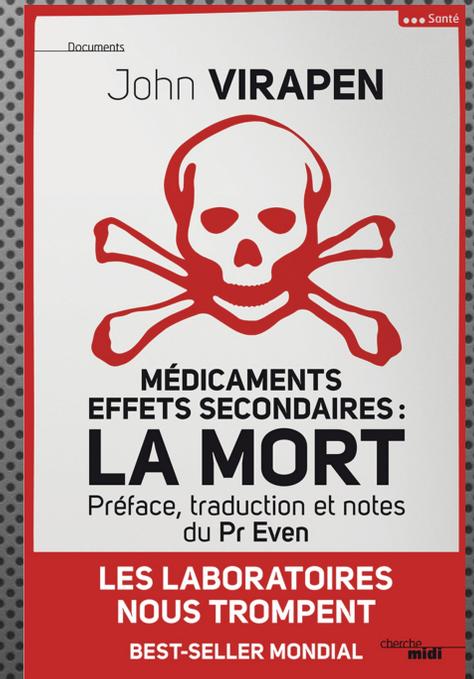
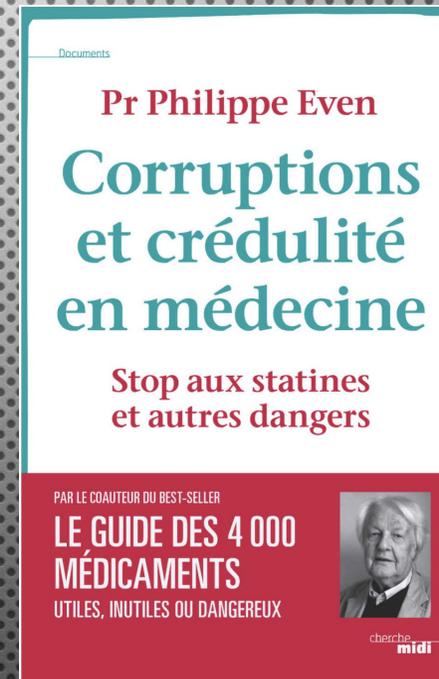
TOP 5 PRIMARY OFFENSE TYPES	PENALTY TOTAL	NUMBER OF RECORDS
drug or medical equipment safety violation	\$5,636,840,000	9
off-label or unapproved promotion of medical products	\$3,373,675,000	10
False Claims Act and related	\$1,148,191,225	20
Foreign Corrupt Practices Act	\$60,216,568	3
kickbacks and bribery	\$34,700,000	3

« Quand les journalistes me demandent ce que je pense des normes éthiques de l'industrie pharmaceutique, je réponds souvent par une blague, ou je dis que je n'ai pas de réponse parce que je ne peux pas juger ce qui n'existe pas.

LA SEULE NORME DANS L'INDUSTRIE EST L'ARGENT,
ET LA VALEUR D'UNE PERSONNE DÉPEND DE LA
SOMME D'ARGENT QU'ELLE RAPPORTE. »

Peter Gøtzsche, directeur de longue date du Nordic Cochrane Center et professeur de conception et d'analyse de la recherche clinique à l'Université de Copenhague (2013).

devenir depuis le début des années 1990 la première ou deuxième industrie du monde, avec, selon les périodes, 2 000 à 3 000 milliards de dollars de capitalisation boursière, 600 à 800 milliards de chiffre d'affaires, 120 à 150 milliards de bénéfices, soit chaque année 20 % de mieux, et qui, infiltrée dans toutes les instances institutionnelles, nationales et internationales, médicales, administratives et politiques, est aujourd'hui, comme le dit le rapport officiel que lui a consacré l'ONU en 2006, « hors de tout contrôle ». Mais cette industrie des années 1990-2010 n'aurait rien pu, **ne pourrait rien, sans ces médecins universitaires consultants**, ces leaders d'opinion clé, ces *key opinion leaders* (KOL), qui seuls lui permettent de tromper et d'abuser la crédulité des autres médecins, des agences gouvernementales de santé, exceptionnellement lentes à réagir, autoparalysées et peu compétentes, et parfois sous l'influence cachée mais directe de l'industrie.



Research

Suicidality and aggression during antidepressant treatment: systematic review and meta-analyses based on clinical study reports

BMJ 2016 ; 352 doi: <https://doi.org/10.1136/bmj.i65> (Published 27 January 2016)

Cite this as: *BMJ* 2016;352:i65

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Tarang Sharma, PhD student^{1 2}, Louise Schow Guski, medical student^{1 2}, Nanna Freund, medical student^{1 2},
Peter C Gøtzsche, professor^{1 2}

Conclusions Because of the shortcomings identified and having only partial access to appendices with no access to case report forms, the harms could not be estimated accurately. In adults there was no significant increase in all four outcomes, but in children and adolescents the risk of suicidality and aggression doubled. To elucidate the harms reliably, access to anonymised individual patient data is needed.

HEALTH

Many Antidepressant Studies Found Tainted by Pharma Company Influence

A review of studies that assess clinical antidepressants shows hidden conflicts of interest and financial ties to corporate drugmakers

By Roni Jacobson on October 21, 2015



The latest study, published in the *Journal of Clinical Epidemiology*, which evaluated 185 meta-analyses, found that one third of them were written by pharma industry employees. “We knew that the industry would fund studies to promote its products, but it’s very different to fund meta-analyses,” which “have traditionally been a bulwark of evidence-based medicine,” says John Ioannidis, an epidemiologist at Stanford University School of Medicine and co-author of the study. “It’s really amazing that there is such a massive influx of influence in this field.”

ORIGINAL ARTICLE | VOLUME 70, P155-163, FEBRUARY 2016

Meta-analyses with industry involvement are massively published and report no caveats for antidepressants

Shanil Ebrahim • Sheena Bance • Abha Athale • Cindy Malachowski • John P.A. Ioannidis  

Published: September 20, 2015 • DOI: <https://doi.org/10.1016/j.jclinepi.2015.08.021> •  Check for updates



Abstract

Objectives

To identify the impact of industry involvement in the publication and interpretation of meta-analyses of antidepressant trials in depression.

Un grand patron révèle les abus de l'industrie pharmaceutique

Dans une vidéo devenue virale, Marc Simoncini (chef d'entreprise) raconte sa conversation glaçante avec un dirigeant de laboratoire. Une séquence qui dévoile les côtés sombres de l'industrie pharmaceutique.



Marc Simoncini décrit son expérience fâcheuse avec un laboratoire pharmaceutique.

V. Le problème de la recherche et des publications

[Home](#) > [International Urogynecology Journal](#) > [Article](#)

Editorial | [Published: 13 July 2017](#)

Why published research is untrustworthy

[Gunnar Lose](#)  & [Niels Klarskov](#)

[International Urogynecology Journal](#) **28**, 1271–1274 (2017) | [Cite this article](#)

11k Accesses | **3** Citations | **39** Altmetric | [Metrics](#)

As much as 90% of the published medical information is flawed according to John Ioannidis, one of the true experts on credibility of medical research [1], and former *BMJ* editor-in-chief, Richard Smith, has claimed that “most of what is published in journals is just plain wrong or nonsense.” The poor quality of medical research is not a new criticism [2]; however, concern has been expressed within a broad field of specialties in parallel with reports that studies are fraught with problems including poor reproducibility [3].

Why Most Published Research Findings Are False

John P. A. Ioannidis

Published: August 30, 2005 • <https://doi.org/10.1371/journal.pmed.0020124>

Article	Authors	Metrics	Comments	Media Coverage
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Abstract

Modeling the Framework
for False Positive
Findings

Bias

Testing by Several
Independent Teams

Corollaries

Most Research Findings
Are False for Most
Research Designs and
for Most Fields

Claimed Research
Findings May Often Be
Simply Accurate

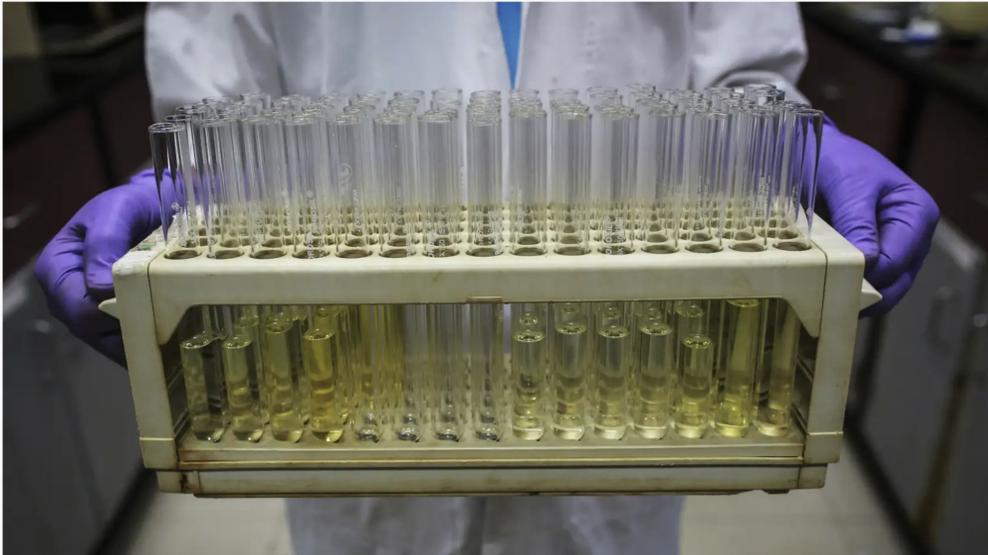
Abstract

Summary

There is increasing concern that most current published research findings are false. The probability that a research claim is true may depend on study power and bias, the number of other studies on the same question, and, importantly, the ratio of true to no relationships among the relationships probed in each scientific field. In this framework, a research finding is less likely to be true when the studies conducted in a field are smaller; when effect sizes are smaller; when there is a greater number and lesser preselection of tested relationships; where there is greater flexibility in designs, definitions, outcomes, and analytical modes; when there is greater financial and other interest and prejudice; and when more teams are involved in a scientific field in chase of statistical significance. Simulations show that for most study designs and settings, it is more likely for a research claim to be false than true. Moreover, for many current scientific fields, claimed research findings may often be simply accurate measures of the prevailing bias. In this essay, I discuss the implications of these problems for the conduct and interpretation of research.

STANDARD DEVIATION

Nearly all of our medical research is wrong



So many negative results we never hear about.

Image: Reuters/Danish Siddiqui

By **Danielle Teller** | Published January 29, 2016

Something is rotten in the state of biomedical research. Everyone who works in the field knows this on some level. We applaud presentations by colleagues at conferences, hoping that they will extend the same courtesy to us, but we know in our hearts that the majority or even the vast majority of our research claims are false.

When it came to light that the biotechnology firm Amgen tried to reproduce 53 “landmark” cancer studies and managed to confirm only six, scientists were “shocked.” It was terrible news, but if we’re honest with ourselves, not entirely unexpected. The pernicious problem of irreproducible data has been discussed among scientists for decades. Bad science wastes a colossal amount of money, not only on the irreproducible studies themselves, but on misguided drug development and follow-up trials based on false information. And while unsound preclinical studies may not directly harm patients, there is an enormous opportunity cost when drug makers spend their time on wild goose chases. Discussions about irreproducibility usually ends with shrugs, however—what can we do to combat such a deep-seated, systemic problem?



Review article

Reproducibility of science: Fraud, impact factors and carelessness

[D.A. Eisner](#) 

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Highlights

- Much of science cannot be reproduced; this article reviews the causes.
- Fraud, sometimes encouraged by the need to publish in high impact journals contributes.
- Another, major factor, is poor experimental design and statistical analysis.
- The scientific community needs to reform before change is thrust upon it.

Published: 02 February 2017

Cancer reproducibility project yields first results

[Asher Mullard](#)

Nature Reviews Drug Discovery 16, 77 (2017) | [Cite this article](#)

1825 Accesses | 4 Citations | 6 Altmetric | [Metrics](#)

In 2011, Bayer researchers made a splash with news that they could only replicate 25% of the preclinical academic projects that they took on (*Nat. Rev. Drug Discov.* **10**, 712; 2011). Amgen fared even worse when trying to recreate the findings from cancer papers, with just an 11% success rate (*Nature* **483**, 531–533; 2012).

Both surveys galvanized the biomedical community to address the reproducibility crisis, but neither provided raw data or pointed to the specific papers that had been assessed. To get a more transparent and actionable understanding of the scope and causes of the problem, the Center for Open Science launched the Reproducibility Project: Cancer Biology in 2013. They picked 50 papers from *Nature*, *Science* and other high-profile publications, and hired independent laboratories to try to replicate the findings.

Their first, messy, [results have now been published](#) in *eLife*. Out of five completed studies, two substantially reproduced the initial results, two yielded uninterpretable results and one could not reproduce the initial results.

Erkki Ruoslahti, an author of the paper that could not be reproduced and a researcher at Sanford Burnham Prebys Medical Discovery Institute in La Jolla, California, USA, says that at least [10 other labs have validated his findings](#). This discrepancy, along with the uninterpretable results, highlights [the multifold challenges](#) of replication studies. Many papers, for example, have incomplete methodology sections that make for time-consuming and inexact follow-up.

Because of the unexpectedly high cost of replication studies, the Reproducibility Project has scaled back its ambitions to now only assess around 30 studies.

> [J Clin Epidemiol.](#) 2022 Apr 18;148:160-169. doi: 10.1016/j.jclinepi.2022.04.017.

Online ahead of print.

Most healthcare interventions tested in Cochrane Reviews are not effective according to high quality evidence: a systematic review and meta-analysis

[Jeremy Howick](#)¹, [Despina Koletsi](#)², [John P A Ioannidis](#)³, [Claire Madigan](#)⁴, [Nikolaos Pandis](#)⁵, [Martin Loef](#)⁶, [Harald Walach](#)⁶, [Sebastian Sauer](#)⁷, [Jos Kleijnen](#)⁸, [Jadbinder Sehra](#)⁹, [Tess Johnson](#)¹⁰, [Stefan Schmidt](#)¹¹

Affiliations + expand

PMID: 35447356 DOI: [10.1016/j.jclinepi.2022.04.017](#)

Abstract

Objective: To estimate the proportion of healthcare interventions tested within Cochrane Reviews that are effective according to high-quality evidence.

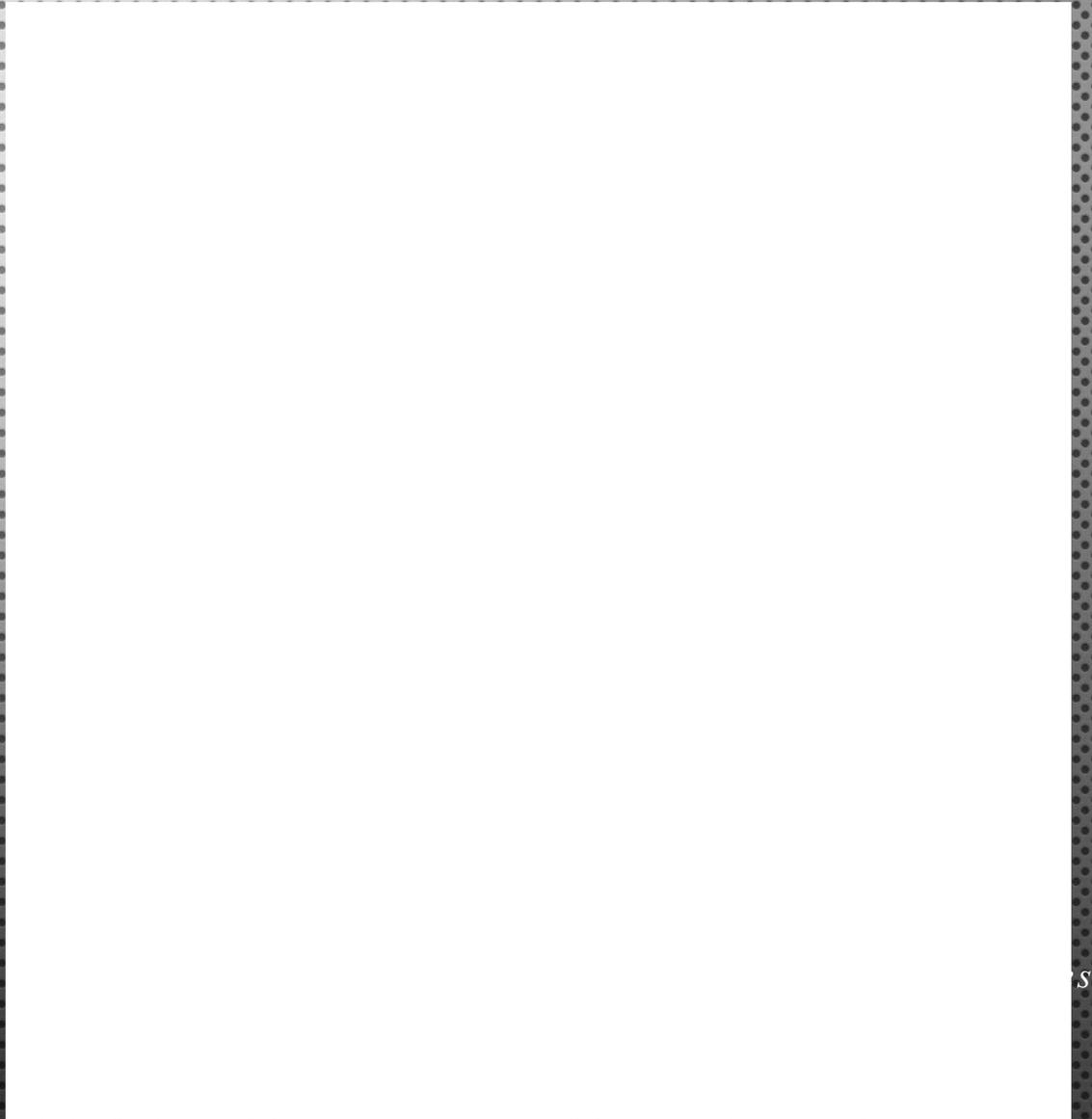
Methods: We selected a random sample of 2,428 (35%) of all Cochrane Reviews published between 1 January 2008 and 5 March 2021. We extracted data about interventions within these reviews that were compared with placebo, or no treatment, and whose outcome quality was rated using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) system. We calculated the proportion of interventions whose benefits were based on high-quality evidence (defined as having high quality GRADE rating for at least one primary outcome, statistically significant positive results, and being judged by review authors as effective. We also calculated the proportion of interventions that suggested harm.

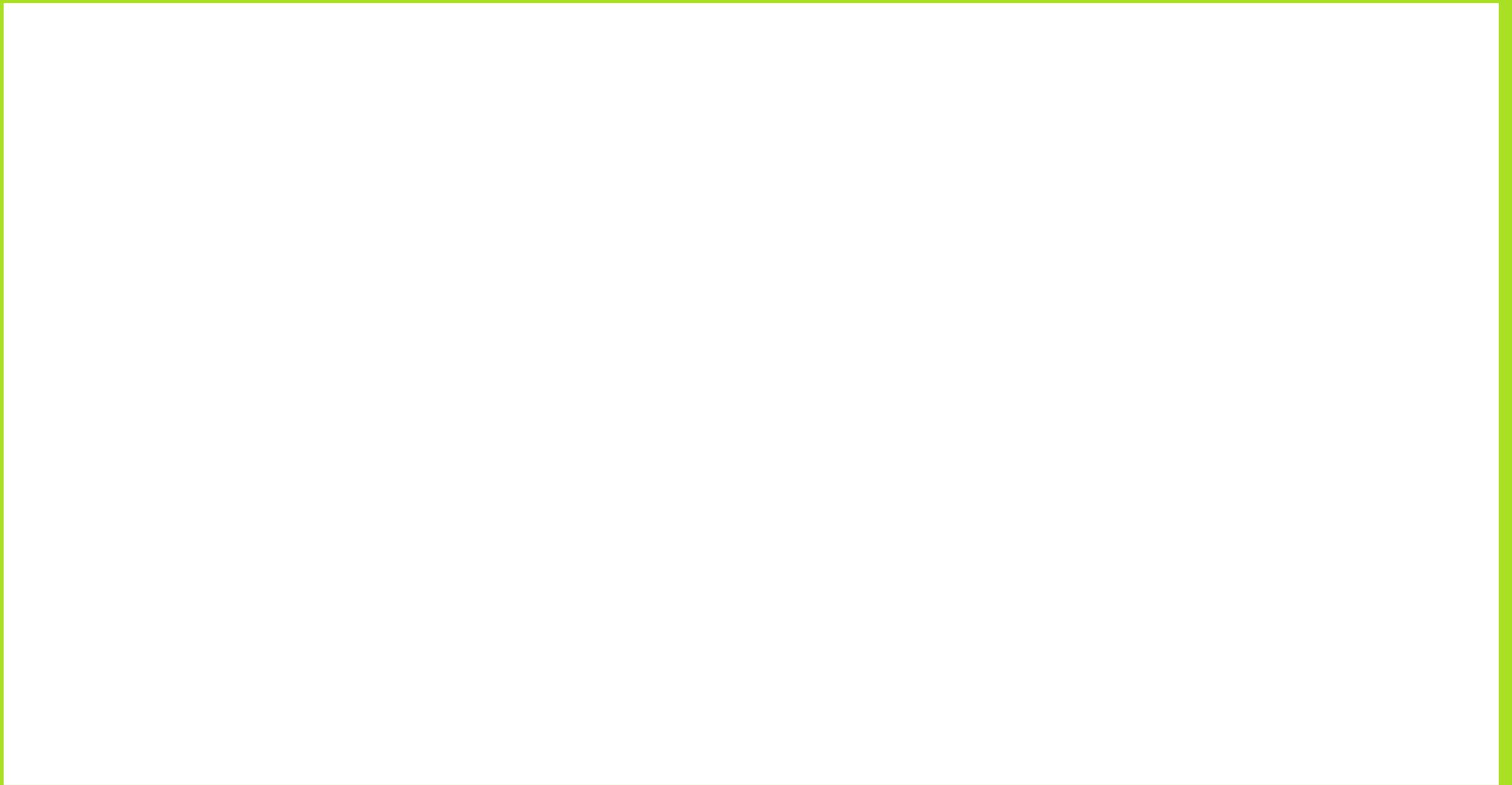
Results: Of 1,567 eligible interventions, 87 (5.6%) had high-quality evidence supporting their benefits. Harms were measured for 577 (36.8%) interventions. There was statistically significant evidence for harm in 127 (8.1%) of these. Our dependence on the reliability of Cochrane author assessments (including their GRADE assessments) was the main potential limitation of our study.

Conclusion: More than 9 in 10 healthcare interventions studied within recent Cochrane Reviews are not supported by high-quality evidence, and harms are under-reported.

Keywords: Epidemiology; Evidence; Harm; Quality; Safety; Systematic review.

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Ressources associées au Coronavirus (COVID-19)

Comparer les estimations d'effets issues d'essais contrôlés randomisés et d'études observationnelles

Date de publication:

29 avril 2014

Auteurs:

Anglemyer A, Horvath HT, Bero L

Groupe de Revue Principal:

[Methodology Review Group](#)

Les chercheurs et organisations font souvent référence à des preuves issues d'essais contrôlés randomisés (ECR) afin de déterminer l'efficacité d'un traitement ou d'une intervention dans des conditions idéales, tandis que des études de type observationnel sont utilisées pour mesurer l'efficacité d'une intervention dans un contexte non-expérimental et « plus réel ». Parfois, les résultats d'ECR et d'études observationnelles portant sur les mêmes question peuvent obtenir des résultats différents. Cette revue cherche à établir si ces différences dans les résultats sont liées au type d'étude en lui-même, ou à d'autres caractéristiques des études.



[On parle de cet article](#)

Nos résultats apportent peu de preuves indiquant des différences significatives au niveau de l'estimation de l'effet entre les études observationnelles et les ECR, indépendamment de la conception spécifique des études observationnelles, de l'hétérogénéité, de l'inclusion d'études pharmacologiques, ou des ajustements des scores de propension. Des facteurs autres que le plan d'étude *per se*, doivent être pris en compte lorsque les motifs d'un désaccord entre les résultats d'ECR et d'études observationnelles sont analysés.



Didier Raoult  @raoult_didier · 28 févr.



La Haute Autorité de Santé est maintenant d'accord avec moi : les essais de traitements comparatifs non randomisés sont aussi acceptables. Pas la peine de me harceler depuis trois ans !



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[CMAJ](#). 2004 Feb 17; 170(4): 477–480.

PMCID: PMC332713

PMID: [14970094](#)

Association between industry funding and statistically significant pro-industry findings in medical and surgical randomized trials

[Mohit Bhandari](#), [Jason W. Busse](#), [Dianne Jackowski](#), [Victor M. Montori](#), [Holger Schünemann](#), [Sheila Sprague](#), [Derek Mears](#), [Emil H. Schemitsch](#), [Dianne Heels-Ansdell](#), and [P.J. Devereaux](#)

Results

Among the 332 randomized trials, there were 158 drug trials, 87 surgical trials and 87 trials of other therapies. In 122 (37%) of the trials, authors declared industry funding. An unadjusted analysis of this sample of trials revealed that industry funding was associated with a statistically significant result in favour of the new industry product (odds ratio [OR] 1.9, 95% confidence interval [CI] 1.3–3.5). The association remained significant after adjustment for study quality and sample size (adjusted OR 1.8, 95% CI 1.1–3.0). There was a nonsignificant difference between surgical trials (OR 8.0, 95% CI 1.1–53.2) and drug trials (OR 1.6, 95% CI 1.1–2.8), both of which were likely to have a pro-industry result (relative OR 5.0, 95% CI 0.7–37.5, $p = 0.14$).

Interpretation

Industry-funded trials are more likely to be associated with statistically significant pro-industry findings, both in medical trials and surgical interventions.

Original Scientific Report | Published: 09 February 2018

The Impact of Financial Conflict of Interest on Surgical Research: An Observational Study of Published Manuscripts

[Deepa V. Cherla](#), [Cristina P. Viso](#), [Oscar A. Olavarria](#), [Karla Bernardi](#) , [Julie L. Holihan](#), [Krislynn M. Mueck](#), [Juan Flores-Gonzalez](#), [Mike K. Liang](#) & [Sasha D. Adams](#)

World Journal of Surgery **42**, 2757–2762 (2018) | [Cite this article](#)

387 Accesses | 5 Citations | 7 Altmetric | [Metrics](#)

Conclusions

Any financial COI (disclosed or undisclosed, relevant or not relevant) significantly influence whether studies report findings favorable to industry. More attention must be paid to improving research design, maximizing transparency in medical research, and insisting that surgeons disclose all COI, regardless of perceived relevance.

Original Article | [Open Access](#) | 

How evidence-based medicine is failing due to biased trials and selective publication

Susanna Every-Palmer MBChB FRANZCP MSc✉, Jeremy Howick BA MSc PhD

First published: 12 May 2014 | <https://doi.org/10.1111/jep.12147> | Citations: 85

Vol 50 – No 4 – 2018



Annals of Medicine

Annals of Medicine



ISSN: 0785-3890 (Print) 1365-2060 (Online) Journal homepage: <https://www.tandfonline.com/loi/iann20>

Why all randomised controlled trials produce biased results

Alexander Krauss

Abstract

Background: Randomised controlled trials (RCTs) are commonly viewed as the best research method to inform public health and social policy. Usually they are thought of as providing the most rigorous evidence of a treatment's effectiveness without strong assumptions, biases and limitations.

Objective: This is the first study to examine that hypothesis by assessing the 10 most cited RCT studies worldwide.

Data sources: These 10 RCT studies with the highest number of citations in any journal (up to June 2016) were identified by searching Scopus (the largest database of peer-reviewed journals).

Results: This study shows that these world-leading RCTs that have influenced policy produce biased results by illustrating that participants' background traits that affect outcomes are often poorly distributed between trial groups, that the trials often neglect alternative factors contributing to their main reported outcome and, among many other issues, that the trials are often only partially blinded or unblinded. The study here also identifies a number of novel and important assumptions, biases and limitations not yet thoroughly discussed in existing studies that arise when designing, implementing and analysing trials.

**[Union of
Concerned Scientists**

REPORTS & MULTIMEDIA / FEATURE

The Disinformation Playbook

**How Business Interests Deceive, Misinform,
and Buy Influence at the Expense of Public
Health and Safety**

Published Oct 10, 2017 | Updated May 18, 2018

THE “DISINFORMATION PLAYBOOK”

A "Disinformation Playbook" has been used for decades by corporations to delay government action on matters that would adversely affect their income and profit.

- 1. **The Fake** - Conduct counterfeit science and try to pass it off as legitimate research
- 2. **The Blitz** - Harass scientists who speak out with results or views inconvenient for industry.
- 3. **The Diversion** - Manufacture uncertainty about science where little or none exists.
- 4. **The Screen** - Buy credibility through alliances with academia or professional societies. 5.
- 5. **The Fix** - Manipulate government officials or processes to influence policy inappropriately.



Hélène Banoun @BanounHelene · 20 mars

Un virus "spécial"

Dans une seule séquence de 37 AA, spike du SRAS-CoV-2 contient

-Un superantigène de type SEB

-Un site furine

-Un motif ENaC

-Un domaine de type Prion

rien de cela n'existe dans la nature



Charles Rixey, MA MBA (c) @CharlesRixey · 19 mars

[1]

A "Special" virus

Within a single 37 AA sequence, SARS-CoV-2's spike contains

-An SEB-like Superantigen

-An FCS

-An ENaC motif

-A Prion-like Domain

There is nothing else even close to it in nature

@WogPogReal @EthicalSkeptic @TyCardon

@Fynnderella1 @Jikkyleaks @JesslovesMJK

[Afficher cette discussion](#)

SARS-CoV-2 Spike Protein: AA 661 – 697

ECDPIGAGICAS YQTQTNSPRRA/RSVASQSIIAYTM

Superantigen SEB: 661 – 685

Furin Cleavage Site: 681 – 685

ENaC: ~ 686 – 689

Prion-Like Domain: 686 – 697

CORRESPONDENCE | VOLUME 395, ISSUE 10226, E42-E43, MARCH 07, 2020

Statement in support of the scientists, public health professionals, and medical professionals of China combatting COVID-19

Charles Calisher  • Dennis Carroll • Rita Colwell • Ronald B Corley • Peter Daszak • Christian Drosten • et al.

[Show all authors](#)

Published: February 19, 2020 • DOI: [https://doi.org/10.1016/S0140-6736\(20\)30418-9](https://doi.org/10.1016/S0140-6736(20)30418-9)



We are public health scientists who have closely followed the emergence of 2019 novel coronavirus disease (COVID-19) and are deeply concerned about its impact on global health and wellbeing. We have watched as the scientists, public health professionals, and medical professionals of China, in particular, have worked diligently and effectively to rapidly identify the pathogen behind this outbreak, put in place significant measures to reduce its impact, and share their results transparently with the global health community. This effort has been remarkable.

We sign this statement in solidarity with all scientists and health professionals in China who continue to save lives and protect global health during the challenge of the COVID-19 outbreak. We are all in this together, with our Chinese counterparts in the forefront, against this new viral threat.



Dr B.  @P_J_Buckhaults · 16 févr. 2021

Conspiracy “theory”. there is a conspiracy among **virologists** connected with **wuhan** institute of virology to mislead the public. its been going on for over a year. **lancet** and nature even biorxiv are all compromised.

To: Peter Daszak[daszak@ecohealthalliance.org]; Baric, Toni C[antoinette_baric@med.unc.edu]
Cc: Alison Andre[andre@ecohealthalliance.org]; Aleksei Chmura[chmura@ecohealthalliance.org]
From: Baric, Ralph S[/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=BB0D9CC80C184735A4E862C3BDD8A15D-RALPH S BAR]
Sent: Thur 2/6/2020 4:01:22 PM (UTC-05:00)
Subject: RE: No need for you to sign the "Statement" Ralph!!

I also think this is a good decision. Otherwise it looks self-serving and we lose impact. ralph

From: Peter Daszak <daszak@ecohealthalliance.org>
Sent: Thursday, February 6, 2020 3:16 PM
To: Baric, Ralph S <rbaric@email.unc.edu>; Baric, Toni C <antoinette_baric@med.unc.edu>
Cc: Alison Andre <andre@ecohealthalliance.org>; Aleksei Chmura <chmura@ecohealthalliance.org>
Subject: No need for you to sign the "Statement" Ralph!!
Importance: High

I spoke with Linfa last night about the statement we sent round. He thinks, and I agree with him, that you, me and him should not sign this statement, so it has some distance from us and therefore doesn't work in a counterproductive way.

Jim Hughes, Linda Saif, Hume Field, and I believe Rita Colwell will sign it, then I'll send it round some other key people tonight. We'll then put it out in a way that doesn't link it back to our collaboration so we maximize an independent voice.

Cheers,

Peter

Peter Daszak
 President

EcoHealth Alliance
 460 West 34th Street – 17th Floor
 New York, NY 10001

Tel.
 Website: www.ecohealthalliance.org
 Twitter: [@PeterDaszak](https://twitter.com/PeterDaszak)

EcoHealth Alliance leads cutting-edge research into the critical connections between human and wildlife health and delicate ecosystems. With this science we develop solutions that prevent pandemics and promote conservation.

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PanDanTag @PanDanTag · 15 mars

États-Unis

Un mémo du Congrès dévoile un des plus grand mensonge de l'histoire de l'humanité.

Le 01/02/2020, A. Fauci (NIAID) organise une réunion avec F. Collins (NIH) et 11 autres scientifiques afin de cacher au l'origine du virus.

page 1/7

textup.fr/680936EQ

Congress of the United States
Washington, DC 20515

MEMORANDUM

TO: Select Subcommittee on the Coronavirus Pandemic Members
FROM: Select Subcommittee on the Coronavirus Pandemic Majority Staff
DATE: March 5, 2023
RE: New Evidence Resulting from the Select Subcommittee's Investigation into the Origins of COVID-19 – "The Proximal Origin of SARS-CoV-2"

On February 1, 2020, Dr. Anthony Fauci, Dr. Francis Collins, and at least eleven other scientists convened a conference call to discuss COVID-19.¹ It was on this conference call that Drs. Fauci and Collins were first warned that COVID-19 may have leaked from a lab in Wuhan, China and, further, may have been intentionally genetically manipulated.²

Only three days later, on February 4, 2020, four participants of the conference call authored a paper entitled "The Proximal Origin of SARS-CoV-2" (Proximal Origin) and sent a draft to Drs. Fauci and Collins.³ Prior to final publication in *Nature Medicine*, the paper was sent to Dr. Fauci for editing and approval.⁴

On April 16, 2020, slightly more than two months after the original conference call, Dr. Collins emailed Dr. Fauci expressing dismay that Proximal Origin—which they saw prior to publication and were given the opportunity to edit—did not squash the lab leak hypothesis and asks if the NIH can do more to "put down" the lab leak hypothesis.⁵ The next day—after Dr. Collins explicitly asked for more public pressure—Dr. Fauci cited Proximal Origin from the White House podium when asked if COVID-19 leaked from a lab.⁶

New evidence released by the Select Subcommittee today suggests that Dr. Fauci "prompted" the drafting of a publication that would "disprove" the lab leak theory, the authors of this paper skewed available evidence to achieve that goal, and Dr. Jeremy Farrar went uncredited despite significant involvement.

¹ E-Mail from Jeremy Farrar to Anthony Fauci, et al. (Feb. 1, 2020) (On file with Comm. Staff).

² Letter from Hon. James Comer, Ranking Member, H. Comm. on Oversight & Reform, & Hon. Jim Jordan, Ranking Member, H. Comm. on the Judiciary, to Hon. Xavier Becerra, Sec'y, U.S. Dep't of Health & Human Servs. (Jan. 11, 2022).

³ E-Mail from Jeremy Farrar to Anthony Fauci & Francis Collins (Feb. 4, 2020) (On file with Comm. Staff).

⁴ E-Mail from Kristian Andersen to Anthony Fauci, Francis Collins, & Jeremy Farrar (Mar. 6, 2020) (On file with Comm. Staff).

⁵ E-Mail from Francis Collins to Anthony Fauci, et al. (Apr. 16, 2020) (On file with Comm. Staff).

⁶ John Haltiwanger, *Dr. Fauci throws cold water on conspiracy theory that coronavirus was created in a Chinese lab*, BLOOMBERG (Apr. 18, 2020).

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How British expert Dr Peter Daszak orchestrated a 'bullying' campaign and coerced top scientists into signing off on a letter to The Lancet aimed at removing blame for Covid-19 from the Wuhan lab he was funding with US money

- Disease ecologist Peter Daszak, 55, warned that a pandemic was coming
- His New York-based non-profit worked with the Wuhan Institute of Virology
- He authored a letter in The Lancet saying virus could not have escaped the lab
- Experts say he has conflicts of interests biasing opinions on pandemic origins

Dr. Makary brought up the suspicious nature of two leading virologists, Dr. Michael Farzan from Scripps Research and Dr Robert Garry from Tulane, suddenly going silent on suspicions of a lab leak after receiving government funding.

"Maybe the two top virologists in the United States, Dr. Michael Farzan from Scripps Research and Dr. Robert Garry from Tulane, told Dr Fauci on his emergency call in January of 2020 – when he was scrambling soon after learning that the NIH was funding the lab – they both said that it was likely from the lab. Both scientists changed their tunes days later in the media and then both scientists received 9 million dollars in subsequent funding from the NIH. It's a no-brainer that it came from the lab."



Dr. Simon Goddek
@goddeketal · [Follow](#)



"Maybe the two top virologists in the United States, Dr Michael Farzan from [@scrippsresearch](#) and Dr Robert Garry from [@Tulane](#) told Dr Fauci on his emergency call in January of 2020 – when he was scrambling soon after learning that the NIH was funding the lab – they both said that... [twitter.com/i/web/status/1...](#)



10:45 PM · Feb 28, 2023





Mh cagnoli LABÉLISÉE BIO @CagnoliMh · 22h



L'homme à gauche sur la photo est Kristian Andersen, un scientifique britannique qui a envoyé un e-mail à Fauci le 31/01/2020, disant que le virus semble fabriqué en laboratoire. ⬇️⬇️⬇️

INSTITUTE FOR BIOLOGICAL SCIENCES, UNIVERSITY OF KENT, PEARCE ROAD, CANTERBURY, KENT, CT2 7NF, UK
 Institute from data obtained from NIH funding databases. Dr. Andersen's funding dramatically increased after changing his position on the characterization of the agent as being manmade, to naturally emerging, after a series of discussions with Dr. Anthony Fauci.

Total Funding Awarded Per Month Before Fauci Teleconference	Total Funding Awarded Per Month After Fauci Teleconference
\$393,079.65	\$800,139.15
Total Funding Awarded Per Calendar Year Before Fauci Teleconference	Total Funding Awarded Per Calendar Year After Fauci Teleconference
\$ 1,042,628.25	\$2,284,161.08
Total Continuing Funding Before Fauci Teleconference	Total Continuing Funding After Fauci Teleconference
\$7,141,011.83	\$23,724,681.83

I declare (or verify, verify, or attest) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.
 Executed On (Date): 13 September 2020
 Signature: 
 Andrew G. Scott, Ph.D., M.A.

January 31, 2020 – BEFORE FAUCI TELECONFERENCE

On January 31, 2020, at 10:02 p.m., Dr. Fauci received an email from British researcher, Dr. Kristian Andersen. Dr. Andersen has received millions of dollars in grants from the NIH. In the email, he warned Dr. Fauci:

[He has to look really closely at all the sequences to see that none of the features (potentially) look engineered ... Like [Hollins], Bob [Garry], Mike [Hargrett], and myself all find the genome inconsistent with evolutionary theory.



February 4, 2020 – AFTER FAUCI TELECONFERENCE

However, we do know what happened four days later. Dr. Andersen, the scientist who sent the original 10:02 p.m. email on January 31, went public with this statement:

"The main crux of theories going around at the moment relate to this virus being somehow engineered ... and that is demonstrably false."

In four days, Dr. Andersen flipped 180 degrees! The only interesting event appears to be the conference call with Dr. Fauci.



V. La vassalisation des agences de santé

Drug Companies & Doctors: A Story of Corruption

Marcia Angell

January 15, 2009 issue



Brèves de presse @Brevesdepresse · 4h

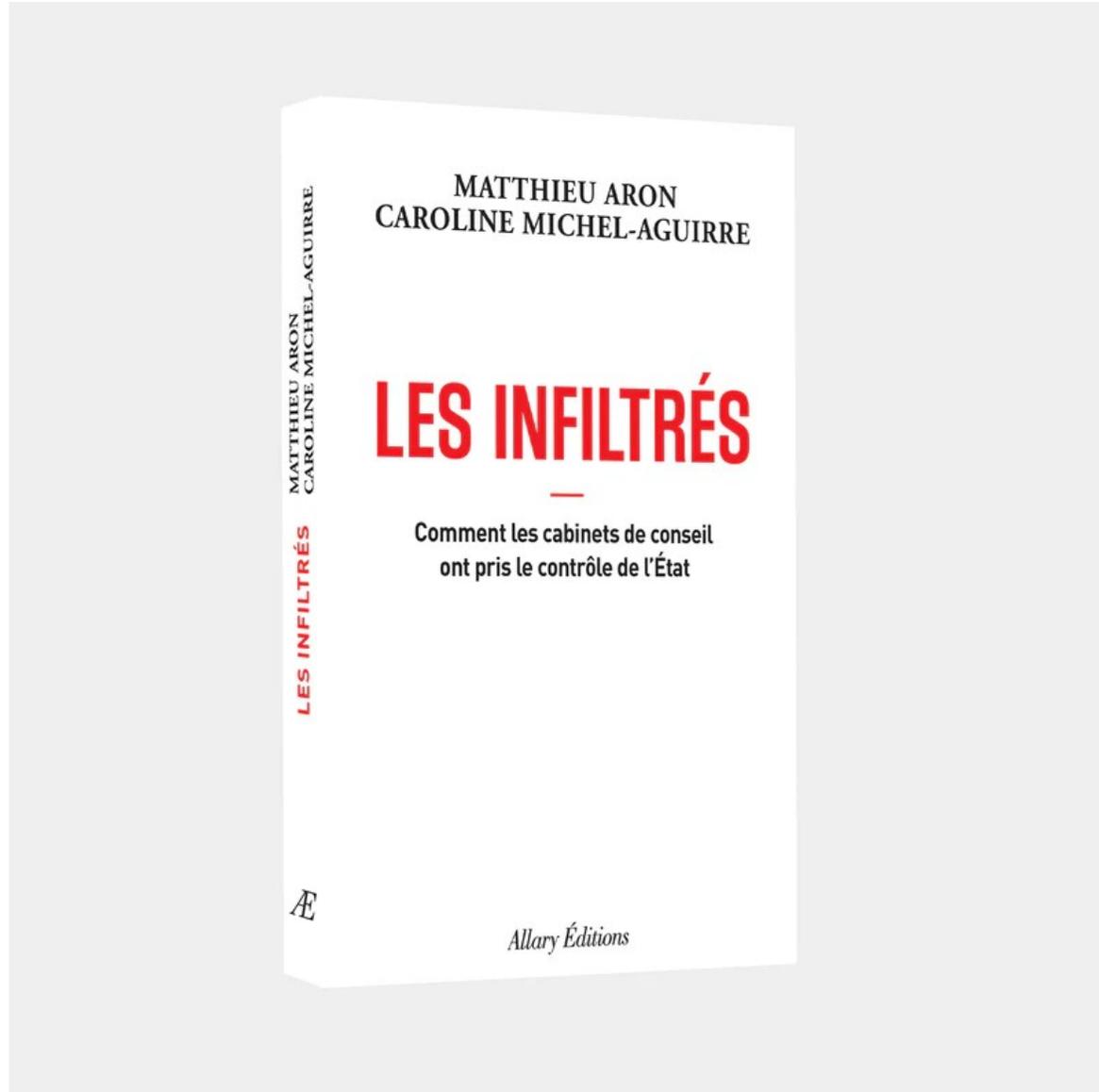


🇫🇷 INFO -L'argent public coule à flots ! L'État a dépensé 2,5 milliards d'€ en achat de conseil en 2021. Entre 2015 et 2021, le recours aux consultants en stratégie (McKinsey et cie) a augmenté de + 1.100%. et même +1.900% pour la communication ! (L'Obs)



nouvelobs.com

L'Etat a dépensé 2,5 milliards d'euros en achat de prestations intelle...
INFO OBS. Pour la première fois, un organisme officiel a pu établir le
chiffrage exact des dépenses en consultants de l'Etat. Dans un ...



MATTHIEU ARON
CAROLINE MICHEL-AGUIRRE

MATTHIEU ARON
CAROLINE MICHEL-AGUIRRE

LES INFILTRÉS

—
Comment les cabinets de conseil
ont pris le contrôle de l'État

Æ

Allary Éditions

Gestion française de la crise du Covid : ce que pointe le rapport de Didier Pittet



Anne Le Gall, édité par Séverine Mermilliod • 20h49, le 18 mai 2021

C'était mal parti, mais finalement, la France s'est bien rattrapée : l'épidémiologiste suisse Didier Pittet a remis mardi à Emmanuel Macron son rapport sur l'évaluation de la gestion de la crise sanitaire dans notre pays. Les experts recommandent notamment d'étudier rapidement les conséquences des reports de soins depuis un an.

Covid-19 en France: un «rapport secret» accable le gouvernement pour sa gestion

Article de RFI • 4 janv.

117

22

20 commentaires



Le ministre de la Santé, Olivier Véran, aux côtés du directeur général de la Santé, Jérôme Salomon, le 18 février 2020.
© Ludovic MARIN / AFP

La gestion des premiers mois de la pandémie de Covid-19 par les autorités françaises est mise à mal par un rapport de l'Inspection générale des affaires sociales (Igas). C'est le quotidien *Le Parisien* qui le révèle ce mercredi 4 janvier, en précisant d'emblée qu'il a mis près de deux ans pour se procurer le document, réalisé entre juillet et octobre 2020. Il faut dire que le constat dressé par les quatre inspecteurs de l'Igas est accablant.

Impréparation, désorganisation, circuit de décision « peu lisible ». Les dysfonctionnements constatés par les quatre **agents de l'igas** sont si nombreux qu'ils ont formulé 32 recommandations pour qu'ils ne se répètent pas.

Experts et médicaments : les conflits d'intérêt à l'Afssaps

L'affaire du Mediator a révélé au public les effets désastreux de la complicité qui règne entre un grand nombre d'experts de l'Agence française de sécurité sanitaire des produits de santé (Afssaps) et les laboratoires pharmaceutiques. Mais l'affaire du Mediator était inévitable, comme Isabelle Robard et moi-même l'avons écrit dans *Santé, mensonges et propagande* (Seuil). Je voudrais retracer ici le fil des évènements qui depuis 20 ans a conduit à cette situation.

Avant l'agence du médicament

Jusqu'en 1993, les autorisations de mise sur le marché des médicaments étaient délivrées par la Commission des AMM de la Direction de la pharmacie et du médicament (DPhM). Dans cette commission siégeaient 23 experts titulaires et 23 experts suppléants. **Près de 80% d'entre eux travaillaient pour l'industrie pharmaceutique** ou pour des sociétés qui conseillaient les laboratoires.

La création de l'Afssaps n'a rien réglé

Ce qui devait conduire en 1998 la Cour des comptes à relever, dans son rapport annuel au parlement, que « *le nombre élevé de liens avec l'industrie pharmaceutique reconnus par les membres des commissions conduit nécessairement à poser la question de leur neutralité.* »

A sa création en 1998, l'Afssaps reprend le principe des déclarations d'intérêt instauré par Didier Tabuteau, un rapport de 1997 ayant précisément fait état de la « *Crainte qu'il puisse y avoir des interférences entre les considérations économiques et d'ordre sanitaire.* »

Quelle est la situation depuis ?

En 2003, relevait-on toujours dans *Santé, mensonges et propagande*, sur les 665 personnes siégeant dans les diverses commissions ou au conseil d'administration de l'Afssaps, 415 (c'est-à-dire 62,4 %) déclaraient un lien avec l'industrie. Seules 207 (31,1 %) ne déclaraient aucun lien, sous réserve que leur mémoire ne leur joue pas des tours !

16 Mars

on



MEDIAPART

 Se con



À la Une

Vidéos

Rubriques ▾

Réforme des retraites

• Israël/Palestine

• Guerre en Ukraine

NOTRE DOSSIER: LE SCANDALE DU MEDIATOR ENQUÊTE

Les gendarmes du médicament faisaient affaire avec les laboratoires

La mise sur le marché de médicaments et leur remboursement sont soumis à des commissions supposées indépendantes. Or, plusieurs mois d'enquête ont permis à Mediapart de découvrir que, pendant des années, des membres éminents de ces commissions (dont un président) ont conseillé secrètement les laboratoires pharmaceutiques. L'affaire, au-delà des questions déontologiques et de conflits d'intérêts, interroge la probité du système sanitaire français.

Michaël Hajdenberg et **Pascale Pascariello**

24 mars 2015 à 08h44

Pendant plus de vingt ans, ils ont eu pouvoir de vie et de mort sur les médicaments en décidant de leur mise sur le marché et de leur remboursement. Aux postes de présidents, vice-présidents ou simples membres des principales commissions du système français, un petit groupe d'amis a parallèlement et secrètement conseillé les laboratoires sur la meilleure façon de présenter leurs dossiers. L'affaire, au-delà des



Dr Peter McCullough: "Nos responsables de la FDA, du NIH et du CDC travaillent pour leur prochain emploi dans l'industrie"

Montrant des exemples, le président de la FDA, Scott Gottlieb, siège désormais au conseil d'administration de Pfizer.

Le commissaire de la FDA, Stephen Hahn, a rejoint Moderna.

Le Dr Rick Bright a supprimé l'HCQ... puis a rejoint la fondation Rockefeller.

Ce ne sont pas des coïncidences.

Les sommes faramineuses placées dans le lobbying servent d'abord à acheter les scientifiques des *National Institutes of Health*. Selon Adam Andrzejewski, ces derniers ont perçu plus de 350 millions de dollars de l'industrie du médicament entre 2010 et 2020, une industrie que ces scientifiques sont censés réguler, chaque commission étant susceptible de constituer un conflit d'intérêts. Des dizaines de millions de dollars sont ainsi versés chaque année par l'industrie pharmaceutique, notamment à Anthony Fauci (23 commissions), au directeur des NIH, Francis Collins (14 commissions) et à l'adjoint de Fauci, Clifford Lane (8 commissions)¹⁰⁶. Le mécanisme est particulièrement pervers : lorsqu'un médicament arrive sur le marché, « *le scientifique du NIH qui a travaillé sur son développement a droit à une revendication de brevet sur ce médicament... Ainsi, la société pharmaceutique qu'il est censé réglementer le rétribue chaque fois qu'un médicament est vendu* ». Adam Andrzejewski appelle cet arrangement « *une alliance impie* ». En 2005, The Associated

tifique. Ainsi, demande Adam Andrzejewski, « *Lorsqu'un bureaucrate fédéral apparaît à la télévision pour nous donner des instructions sanitaires, qui les a payées, pour quelle recherche et pour quelle technologie ? Lorsqu'un patient accepte un essai clinique ou un traitement expérimental, quels sont les intérêts financiers en jeu ?* »¹⁰⁷

MICHEL CUCCHI

INFLUENCE & PANDÉMIES

EXPÉRIENCES HASARDEUSES
ET TENTATIONS AUTORITAIRES



Résurgence

MÉDECINE
& SOCIÉTÉ

Stéphane **Bancel**, PDG de Moderna, admet avoir payé 400 millions \$ de royalties aux NIH de **Fauci** pour un produit imposé par le gvt
"En effet, nous avons récemment effectué, avant Noël de l'année dernière, un paiement de 400 millions \$ aux NIH pour un ancien brevet qu'ils avaient ⬇️

 **Chief Nerd**  @TheChiefNerd · 22 mars

Moderna CEO Stéphane Bancel Admits They Paid Fauci's NIH \$400 Million in Royalties for a Product the Government Mandated

"Indeed we recently made before Christmas last year a \$400 Million payment to the NIH for an old patent that they had developed not related to COVID but [was]..."



Le Covid n'était pas assez léthal pour justifier les autorisations d'urgence de vaccins.

Dr David Cartland @CartlandDavid · 9h

This disease was downgraded to low significance in March 2020 yet still they pushed this for a illness that never matched the amplified response to it. Still they push on children and pregnant cutting medical, safety, ethical & legal corners while abusing an EUA. Beggars belief

[Afficher cette discussion](#)



Covid not deadly enough to fast-track vaccines, Chris Whitty advised ministers

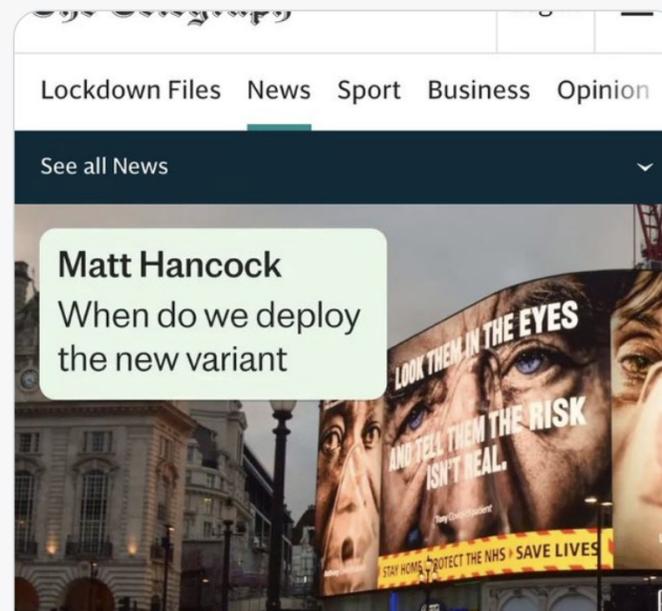
Chief Medical Officer gave opinion in February 2020 after Dominic Cummings

Vous avez retweeté



VERITY France @verity_france · 6 mars

Toujours rien en France sur les [#lockdownfiles](#) , médias silencieux =médias corrompus ?



'Project Fear' authors discussed when to 'deploy' new Covid variant

Matt Hancock's plan to 'frighten the pants off' the public to ensure compliance with lockdown measures exposed in leaked WhatsApp messages



Michel Jean-Dominique @MicheJeanDomi1 · 7 mars

La politique au temps de la décadence...

"Le ministre britannique de la Santé, Matt Hancock, a menacé de bloquer le financement d'un nouveau centre pour enfants handicapés si un député résistant refusait de soutenir son confinement."



Michael P Senger @MichaelPSenger · 7 mars

JUST IN: UK Health Secretary Matt Hancock threatened to block funding for a new centre for disabled children if a resistant Member of Parliament refused to support his lockdown.
[telegraph.co.uk/news/2023/03/06/](https://www.telegraph.co.uk/news/2023/03/06/)

Matt Hancock's plan to block funding for disabled children if MP opposed lockdown

The then health secretary and his political aide discussed taking plan for a learning disability hub in Bury 'off the table'

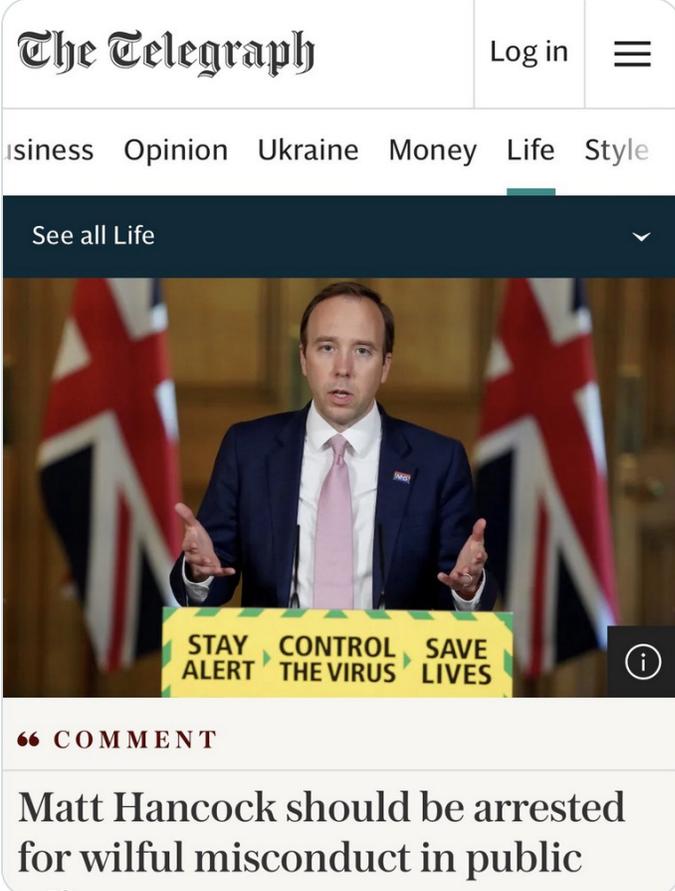
By The Lockdown Files Team
6 March 2023 · 9:00pm



Journal  The Telegraph.

L'ex ministre de la santé « Math Hancock devrait être arrêté pour faute délibérée dans sa mission publique ».

✓ Mensonges et désinformation révélés dans sa gestion de la crise Covid.
(Et Véran ?)



The Telegraph

Log in

Business Opinion Ukraine Money Life Style

See all Life

STAY ALERT CONTROL THE VIRUS SAVE LIVES

COMMENT

Matt Hancock should be arrested for wilful misconduct in public

↳ Vous avez retweeté



for true and humane medicine @tatiann69922625 · 9 févr.

"Alors, pas de science. Souvenons-nous de ça !"

Le président du Conseil européen de la recherche, @mleptin , a déclaré que les efforts visant à vacciner l'ensemble de la population ne devaient pas être abordés comme une entreprise scientifique, mais comme une guerre. 🙄📌



Dr. Simon Goddek @goddeketal · 7 févr.

"So, no science. Let's remember that!"

The President of the European Research Council, @mleptin, declared that efforts to vaccinate the whole population shouldn't be approached as a scientific endeavor, but as warfare.



COMMENT

The evidence is in. Lockdowns kill people – and the more you lock down, the more you kill

The leaked WhatsApp messages show that we have been governed by petty, frightened men who valued appearance over substance



DANIEL HANNAN

18 March 2023 • 5:12pm

Related Topics

The Lockdown Files, Matt Hancock, UK coronavirus lockdown, European lockdown, Coronavirus, Sweden



A study found that, from 2020 to 2022, Sweden had the lowest excess mortality rate in Europe, despite eschewing lockdowns | CREDIT: Jonathan Nackstrand/AFP

Allison Pearson meets Anders Tegnell: 'Lockdown was never on the agenda in Sweden'

While the world's governments pushed crippling Covid restrictions on their people, one nation – and one man – stood apart

By Allison Pearson
23 March 2023 · 6:00am

Related Topics

Sweden, UK coronavirus lockdown,
Coronavirus, Pandemics and
epidemics



'What Tegnell did in the spring of 2020 will be valued and discussed long after he is gone' | CREDIT: Lars Ardarve for The Telegraph

In March 2020, as, one by one, every country in the Western world succumbed to panic and imposed a lockdown on its population, Sweden's state epidemiologist held his nerve and stuck to the plan. The Swedish people would be given sensible advice and told to work from home wherever possible, but apart from a ban on gatherings of over 50 people and a few rules for restaurants, any Covid measures were entirely voluntary. Anders Tegnell simply didn't think the evidence supported a lockdown. A veteran of the swine flu pandemic who



Michel Jean-Dominique @MicheJeanDomi1 · 26 min



Tegnell : "Si l'on remonte à [1918], on peut trouver des cas où l'on a essayé de verrouiller les choses, mais dans tous les plans de lutte contre les pandémies dont nous avons discuté au cours des dernières décennies, la fermeture d'une société n'a jamais été à l'ordre du jour".



Jay Bhattacharya @DrJBhattacharya · 17h

Anders Tegnell: "If you go back to [1918], you can find instances when they tried to lock things down, but in all the pandemic plans we have been discussing during the last decades, closing down a society has never even been on the agenda."

-- Great interview by @AllisonPearson twitter.com/AllisonPearson...

Dr. Kulldorff: There Was Never a Scientific Consensus for Lockdowns

"At the beginning of the pandemic, I was scared for about 10 minutes," professed biostatistician [@MartinKulldorff](#).

But quickly, it became clear that young people were not at risk. We should have never locked down, explained Kulldorff. But this perspective was swiftly slandered and then censored.

And because of that, irreparable harm was done.

"So these are things that we have to live with now and die with for several decades."





Michel Jean-Dominique @MicheJeanDomi1 · 4 mars



Les derniers chiffres concernant la létalité très bénigne du virus pour les personnes de 0 à 69 ans non-vaccinées en première infection contredisent fortement le discours de peur qui a effrayé la population durant cette épidémie.



covidhub.ch

Pr Ioannidis: le Covid a tué 0,095% des moins de 70 ans

L'épidémiologiste le plus cité de la planète, le Pr John Ioannidis, vient de publier les derniers chiffres concernant la létalité très bénigne du ...



Michel Jean-Dominique @MicheJeanDomi1 · 21s



La Suède s'est exceptionnellement bien comportée pendant la pandémie de COVID-19 en évitant les bouclages et les masques de protection. La surmortalité a été l'une des plus faibles au monde.
La grande pandémie devrait être renommée "grande panique".

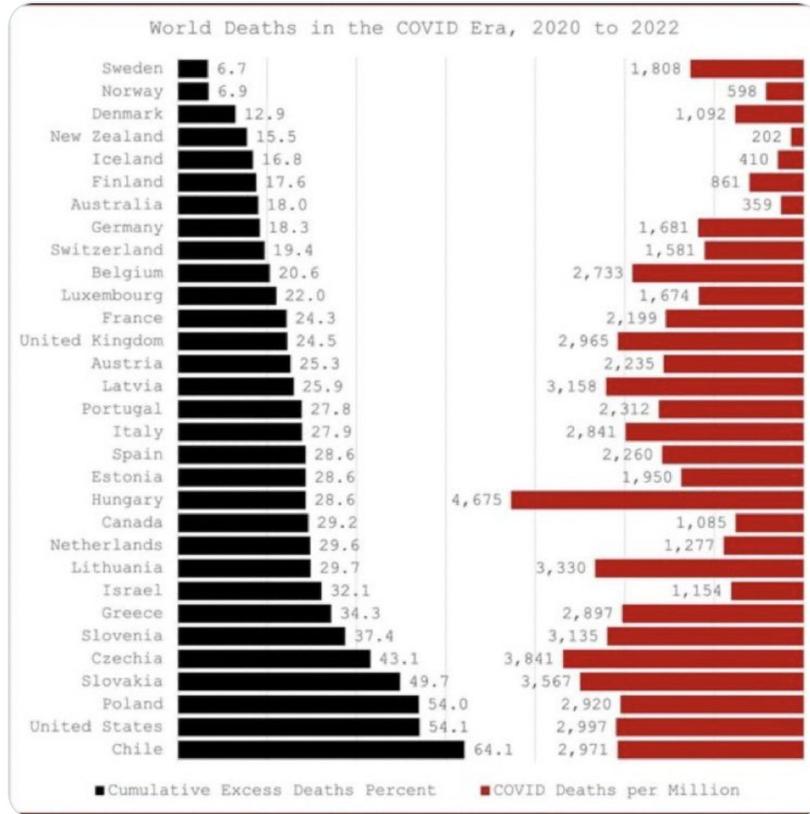


Prof. Peter C Gøtzsche @PGtzsche1 · 2h

Sweden did exceptionally well during the COVID-19 pandemic avoiding lockdowns and face masks. Excess mortality was among the lowest in the world bit.ly/3ZeTV4u The great pandemic should be abbreviated to the great panic

- 🇸🇪 No lockdowns
- 🇸🇪 No school closures
- 🇸🇪 No mask mandates

Sweden had the lowest overall cumulative excess deaths in countries analysed by the OECD during the pandemic era from March 2020 to June 2022. Even lower than Finland, Norway and Denmark.

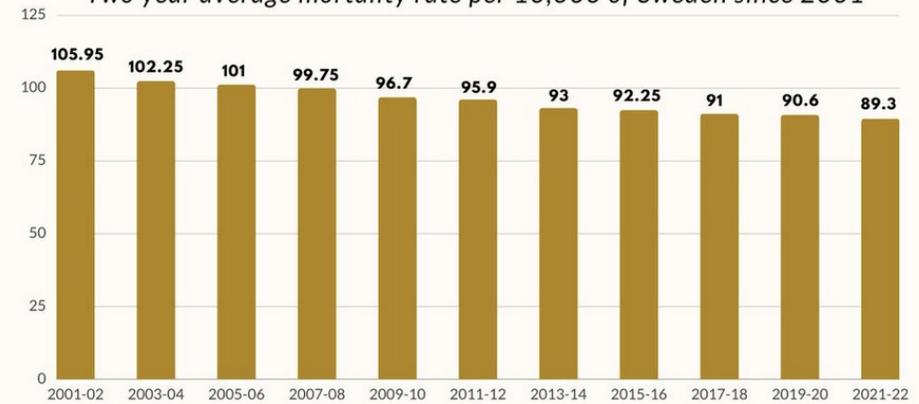


GOOD NEWS

DATA FROM SWEDEN'S OFFICIAL STATISTICAL AGENCY PROVES THAT:

THERE WAS ABSOLUTELY NO COVID "PANDEMIC" IN SWEDEN

Two year average mortality rate per 10,000 of Sweden since 2001



Source: Official Swedish statistical agency - <https://bit.ly/40fkHuY>

Prenons **100 personnes** dans le groupe placebo

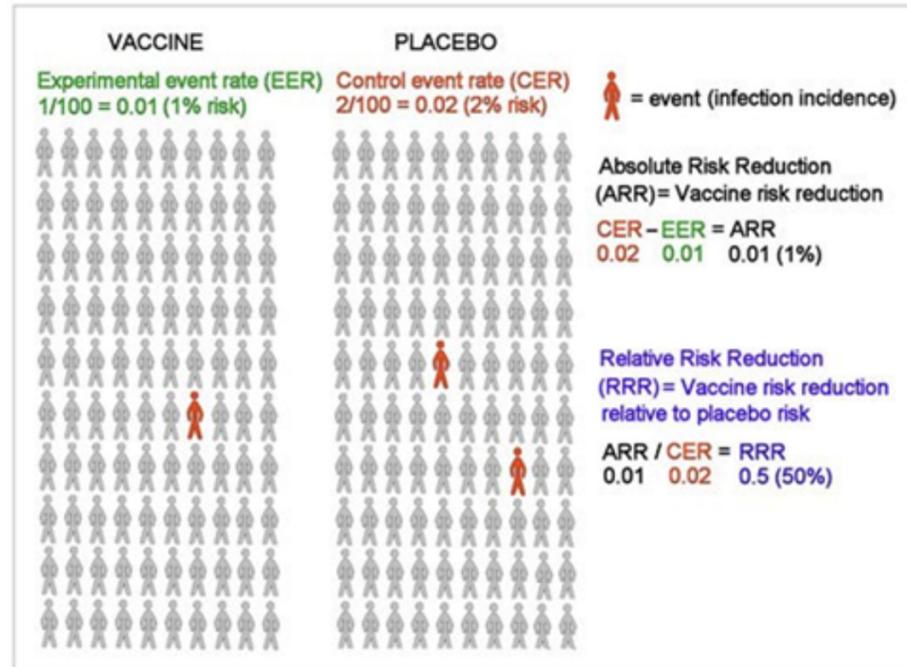
et **100 personnes** dans le groupe vacciné

Supposons que 2 personnes 🧑🏻🧑🏻 attrapent le virus dans le **groupe placebo**

et qu'1 personne 🧑🏻 attrape le virus dans le **groupe vacciné**.

Si l'on compare les groupes, la **REDUCTION** du **RISQUE RELATIF** est de **50%** : 50% de chance en moins d'être malade si on est dans le groupe vacciné (1% est la moitié de 2%).

Cependant au niveau de l'individu, la **REDUCTION** du **RISQUE ABSOLU** n'est plus que de **1%** : entre le groupe vacciné et le groupe placebo on a 1% de réduction (de 2% sans vaccin à 1% avec vaccin) !



CORRESPONDENCE | [VOLUME 21, ISSUE 6, P769, JUNE 2021](#)

What does 95% COVID-19 vaccine efficacy really mean?

[Piero Olliaro](#) 

Published: February 17, 2021 • DOI: [https://doi.org/10.1016/S1473-3099\(21\)00075-X](https://doi.org/10.1016/S1473-3099(21)00075-X)

References

Article info

Linked Articles

It is imperative to dispel any ambiguity about how vaccine efficacy shown in trials translates into protecting individuals and populations. The mRNA-based Pfizer^{1, 2} and Moderna³ vaccines were shown to have 94–95% efficacy in preventing symptomatic COVID-19, calculated as $100 \times (1 \text{ minus the attack rate with vaccine divided by the attack rate with placebo})$. It means that in a population such as the one enrolled in the trials, with a cumulated COVID-19 attack rate over a period of 3 months of about 1% without a vaccine, we would expect roughly 0·05% of vaccinated people would get diseased. It does not mean that 95% of people are protected from disease with the vaccine—a general misconception of vaccine protection also found in a *Lancet Infectious Diseases* Editorial.⁴ In the examples used in the Editorial, those protected are those who would have become diseased with COVID-19 had they not been vaccinated. This distinction is all the more important as, although we know the risk reduction achieved by these vaccines under trial conditions, we do not know whether and how it could vary if the vaccines were deployed on populations with different exposures, transmission levels, and attack rates.

Swiss Public Assessment Report

Comirnaty concentrate for dispersion for injection COVID-19 mRNA Vaccine (nucleoside modified)

International non-proprietary name: tozinameranum (single-stranded, 5'-capped messenger RNA (mRNA) produced using a cell-free in vitro transcription from the corresponding DNA templates, encoding the viral spike (S) protein of SARS-CoV-2).

Pharmaceutical form: Concentrate for dispersion for injection (sterile concentrate).

Dosage strength: 1 dose (0.3 mL) contains 30 micrograms of COVID-19 mRNA Vaccine (embedded in lipid nanoparticles).

Route(s) of administration: Comirnaty should be administered intramuscularly

Marketing Authorisation Holder: Pfizer AG, Zurich

Marketing Authorisation No.: 68225

Decision and Decision date: approved on 19.12.2020, (temporary authorisation in accordance with Art. 9a TPA)

Note:

Assessment Report as adopted by Swissmedic with all information of a commercially confidential nature deleted.

6.5 Final Clinical and Clinical Pharmacology Benefit Risk Assessment

Benefit

A vaccine efficacy of 95.0% (with 95% CI of 90% to 97.9%) was demonstrated for Comirnaty in a pre-defined primary analysis (symptomatic cases of COVID-19 from seven days onward after second dose in participants without evidence of prior infection). The lower limit of 90.0% for the 95% CI for the primary endpoint exceeded the pre-specified 30% lower margin established by the WHO and FDA.

A vaccine efficacy (VE) of 95.0% shows a very high degree of protection against COVID-19 and thus a highly significant benefit of vaccination. It is likely that the vaccine also protects against severe COVID-19 although, because of a very low number of severe cases, the power of the study did not allow any statistical conclusions to be drawn.

A vaccine efficacy of 95% means that if 100 unvaccinated persons are ill with COVID-19, had they been vaccinated only 5 instead of 100 would have fallen ill. Vaccine efficacy is the relative reduction in the risk: whatever a person's risk was before, it is reduced by 95% by the vaccine. It does NOT mean there is a 5% chance of getting COVID-19 if vaccinated. The risk of infection will depend on vaccination status, prevalence of the disease in the population, precautionary measures put in place and individual behaviour.

Uncertainties and Risks

Uncertainties at the time Swissmedic granted a temporary authorisation included:

- The median follow-up after completion of the full vaccination regimen was 1.5 months. Available efficacy data are therefore limited in terms of follow-up duration, and the efficacy of the vaccine over a longer time (duration of protection) remains unknown. More data are expected to become available post-authorisation.

A vaccine efficacy (VE) of 95.0% shows a very high degree of protection against COVID-19 and thus a highly significant benefit of vaccination. It is likely that the vaccine also protects against severe COVID-19 although, because of a very low number of severe cases, the power of the study did not allow any statistical conclusions to be drawn.

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Medical Journals Are an Extension of the Marketing Arm of Pharmaceutical Companies

Richard Smith

Published: May 17, 2005 • <https://doi.org/10.1371/journal.pmed.0020138>

Examples of Methods for Pharmaceutical Companies to Get the Results They Want from Clinical Trials

- › Conduct a trial of your drug against a treatment known to be inferior.
- › Trial your drugs against too low a dose of a competitor drug.
- › Conduct a trial of your drug against too high a dose of a competitor drug (making your drug seem less toxic).
- › Conduct trials that are too small to show differences from competitor drugs.
- › Use multiple endpoints in the trial and select for publication those that give favourable results.
- › Do multicentre trials and select for publication results from centres that are favourable.
- › Conduct subgroup analyses and select for publication those that are favourable.
- › Present results that are most likely to impress—for example, reduction in relative rather than absolute risk.

VI. Ordres médicaux et formatage



Jay Bhattacharya  @DrJBhattacharya · 11h



Using medical board to persecute political opponents seems like a good way to make half the public distrust doctors. Glad to hear the MBMP did the right thing, [@drscottjensen](#)!



Scott Jensen  @drscottjensen · 20h

The Minnesota Board of Medical Practice has once again dismissed all charges against me, today is a victory for all of us.



Depuis quand... ?

- Interdit-on aux médecins de recevoir et de traiter leurs patients ?!
- Sanctionne-t-on des médecins qui ont soigné leurs patients sans dommages et à la satisfaction de ceux-ci avec des remèdes bénéficiant d'une AMM ?!
- Impose-t-on une expérimentation médicale à la population ?
- Vaccine-t-on les femmes enceintes ?!
- Vaccine-t-on pendant une épidémie ?
- Vaccine-t-on des catégories non à risque de la population ?
- Prend-on le pouvoir sur le corps des gens ?!
- Énonce-t-on avec autorité des messages faux ou douteux ?!



Article

Intracellular Reverse Transcription of Pfizer BioNTech COVID-19 mRNA Vaccine BNT162b2 In Vitro in Human Liver Cell Line

Markus Aldén ¹, Francisko Olofsson Falla ¹, Daowei Yang ¹, Mohammad Barghouth ¹, Cheng Luan ¹, Magnus Rasmussen ² and Yang De Marinis ^{1,*}

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² Infection Medicine, Department of Clinical Sciences, Lund University, 22362 Lund, Sweden; magnus.rasmussen@med.lu.se

* Correspondence: yang.de_marinis@med.lu.se

Abstract: Preclinical studies of COVID-19 mRNA vaccine BNT162b2, developed by Pfizer and BioNTech, showed reversible hepatic effects in animals that received the BNT162b2 injection. Furthermore, a recent study showed that SARS-CoV-2 RNA can be reverse-transcribed and integrated into the genome of human cells. In this study, we investigated the effect of BNT162b2 on the human liver cell line Huh7 in vitro. Huh7 cells were exposed to BNT162b2, and quantitative PCR was performed on RNA extracted from the cells. We detected high levels of BNT162b2 in Huh7 cells and changes in gene expression of long interspersed nuclear element-1 (LINE-1), which is an endogenous reverse transcriptase. Immunohistochemistry using antibody binding to LINE-1 open reading frame-1 RNA-binding protein (ORFp1) on Huh7 cells treated with BNT162b2 indicated increased nucleus distribution of LINE-1. PCR on genomic DNA of Huh7 cells exposed to BNT162b2 amplified the DNA sequence unique to BNT162b2. Our results indicate a fast up-take of BNT162b2 into human liver cell line Huh7, leading to changes in LINE-1 expression and distribution. We also show that BNT162b2 mRNA is reverse transcribed intracellularly into DNA in as fast as 6 h upon BNT162b2 exposure.

Keywords: COVID-19 mRNA vaccine; BNT162b2; liver; reverse transcription; LINE-1; Huh7



Citation: Aldén, M.; Olofsson Falla, F.; Yang, D.; Barghouth, M.; Luan, C.; Rasmussen, M.; De Marinis, Y.

Intracellular Reverse Transcription of Pfizer BioNTech COVID-19 mRNA Vaccine BNT162b2 In Vitro in Human Liver Cell Line. *Curr. Issues Mol. Biol.* **2022**, *44*, 1115–1126. <https://doi.org/10.3390/cimb44030073>

ARTICLE | VOLUME 185, ISSUE 6, P1025-1040.E14, MARCH 17, 2022

Immune imprinting, breadth of variant recognition, and germinal center response in human SARS-CoV-2 infection and vaccination

Katharina Röltgen ¹⁴ • Sandra C.A. Nielsen ¹⁴ • Oscar Silva ¹⁴ • ... Benjamin A. Pinsky • Kari C. Nadeau ¹⁵ •

Scott D. Boyd ^{15, 16} • Show all authors • Show footnotes

Open Access • Published: January 24, 2022 • DOI: <https://doi.org/10.1016/j.cell.2022.01.018>

Check for updates



Highlights

- Vaccination confers broader IgG binding of variant RBDs than SARS-CoV-2 infection
- Imprinting from initial antigen exposures alters IgG responses to viral variants
- Histology of mRNA vaccinee lymph nodes shows abundant GCs
- Vaccine spike antigen and mRNA persist for weeks in lymph node GCs

German Minister of Health Karl **Lauterbach** has issued an apology to the public and admitted that the **Covid** shots he once promoted are causing "severe disabilities" that will likely be "permanent."



German Minister of Health Karl **Lauterbach**, who once claimed that **COVID-19** vaccination was free of side effects, admitted last week that he was wrong, saying adverse reactions occur at a rate of one in 10,000 doses and can cause "severe disabilities."



theepochtimes.com

COVID-19 Vaccines Can Cause 'Permanent Disabilities': German He...
German Minister of Health Karl Lauterbach, who once claimed that COVID-19 vaccination was free of side effects, admitted ...



REPUBLIQUE ET CANTON DE GENEVE
Département de la sécurité, de la population et de la santé
Direction générale de la santé

DSPS - DGS
Service du médecin cantonal
Rue Adrien-Lachenal 8
1207 Genève

Circulaire aux médecins et aux
pharmacies du canton de Genève

N/réf. : ATN/NV

Genève, le 17 août 2021

Concerne : prescriptions et remise de médicaments dans le cadre du traitement du COVID-19

Madame, Monsieur,

Nous avons été informées que des médecins effectuaient des prescriptions d'ivermectine ou de Plaquenil® dans le cadre du traitement du COVID-19.

Pour rappel, l'ivermectine n'est pas approuvé dans le traitement de l'infection à SRAS-CoV-2. Les données probantes fiables disponibles ce jour ne soutiennent pas son utilisation dans le traitement ou la prévention de la COVID-19 en dehors d'essais randomisés bien conçus ([lien](#)). L'ivermectine n'est donc recommandé ni dans la prévention, ni dans le traitement du COVID-19.

De même, de nombreuses études confirment à présent que l'hydroxychloroquine ne diminue pas la mortalité ni la durée de la maladie en milieu hospitalier. La prescription d'hydroxychloroquine n'est plus recommandée ni dans la prévention, ni dans le traitement du COVID-19 et ceci est en accord avec de nombreuses recommandations nationales et internationales.

La direction générale de la santé se réserve le droit de prendre des sanctions administratives en cas de non-respect répété des bonnes pratiques en matière de prescription et de remise des médicaments concernés.

Vous remerciant par avance de l'attention que vous porterez à ce courrier et de votre coopération, nous vous adressons, Madame, Monsieur, nos salutations les meilleures.

Docteure Nathalie Vernaz
Pharmacienne cantonale

Docteure Aglaé Tardin
Médecin cantonale

Elle a consisté à faire admettre aux populations par la manipulation des esprits la légitimité de cet adage politique : « La fin justifie les moyens ».

Les consciences ont été manipulées par des cabinets influenceurs au nom du bien commun. Il est dès lors devenu acceptable :

- ✧ De ne pas soigner les gens ;
- ✧ D'ostraciser des personnes en leur ôtant leurs moyens d'existence ;
- ✧ D'insécuriser les populations ;
- ✧ De créer la panique ;
- ✧ D'utiliser les chantages et les conflits de loyauté ;
- ✧ De ne pas honorer nos devoirs anthropologiques et spirituels envers nos morts ;
- ✧ D'abandonner nos anciens ;
- ✧ D'euthanasier une partie de la population considérée comme inutile ;
- ✧ De faire le tri entre les patients ;
- ✧ De maltraiter les enfants et les adolescents ;
- ✧ D'arracher les nouveau-nés de leur mère, interdits d'allaitement, mis dans des box fermés au sein de grandes salles déshumanisées.

VII. Formation et pratique

L'enseignement médical sous influence en France

Par Cécile Thibert | Mis à jour le 10/01/2017 à 19:39 / Publié le 10/01/2017 à 18:15



Commentez 



Aucune faculté de médecine n'encadre les interactions entre enseignants, étudiants et firmes pharmaceutiques.

Zéro: c'est la note désastreuse obtenue par les trois quarts des facultés françaises de médecine à la première évaluation des moyens mis en œuvre pour protéger leurs étudiants des conflits d'intérêts. L'étude, dont les résultats ont été publiés mardi dans la revue scientifique *Plos One*, est à l'initiative du Formindep, une association qui milite pour une formation et une information médicales indépendantes.

> [J Law Med Ethics](#). 2012 Fall;40(3):482-7. doi: 10.1111/j.1748-720X.2012.00680.x.

Conflicts of interest and your physician: psychological processes that cause unexpected changes in behavior

[Sunita Sah](#) ¹

Affiliations + expand

PMID: 23061575 DOI: [10.1111/j.1748-720X.2012.00680.x](#)

Abstract

The ubiquitous nature of medical conflicts of interest is attracting increased attention from physicians, policymakers, and patients. However, little work has examined the psychological processes at play in the presence of such conflicts. I investigate the subtle influences arising from conflicts of interest that change behavior in both physicians and patients. First, I explore why physicians accept gifts from pharmaceutical companies and medical device manufacturers that appear, to many critics, to be unethical. I review evidence from my published and ongoing research that demonstrates two psychological processes that enable physicians to accept industry gifts: (a) a sense of entitlement and (b) a sense of invulnerability to the biasing effects of conflicts of interest. Second, I investigate the situations that may increase or decrease bias. I find that people, subject to a financial conflict of interest, show greater bias in their advice when they feel less able to identify with the advice-recipient(s). This, perversely, leads to advisors giving more biased advice to groups of people than to one identified individual. Finally, I examine the impact of the conflicted advice on the patient and the success of policies intended to manage such conflicts. Mandatory second opinions and disclosure are often advocated as potential solutions to deal with conflicts of interest. However, both policies have

VIII. Epistémè



***« La médecine est un art au
carrefour de plusieurs
sciences »***

Georges Canguilhem

X. Une tentation totalitaire

↻ You Retweeted



Laurent Mucchielli @LMucchielli · 6h



Rony Brauman dans [@humanite_fr](#) le 19/09/22 : "l'OMS est aujourd'hui partagée entre le pouvoir de Pékin, le lobby pharmaceutique et celui des financements privés, notamment de la Fondation Bill Gates (...). j'estime que l'OMS se rend complice de cette dérive politico-mafieuse".





L'histoire française du cabinet commence en 1964 en ciblant les polytechniciens, très influents dans l'industrie.
© Dessin de Pinel.

Article abonné

Consultocratie

M McKinsey, le cabinet qui dirige le monde (et la vaccination en France)

Par Étienne Girard , Franck Dedieu , Laurence Dequay et Natacha Polony

Please cite this article as:

hypothesis

Anne-Emanuelle Birn, Philanthrocapitalism, past and present: The Rockefeller Foundation, the Gates Foundation, and the setting(s) of the international/global health agenda. *Hypothesis* 2014, 12(1): e8, doi:10.5779/hypothesis.v12i1.229.

Philanthrocapitalism, past and present: The Rockefeller Foundation, the Gates Foundation, and the setting(s) of the international/global health agenda

Anne-Emanuelle Birn

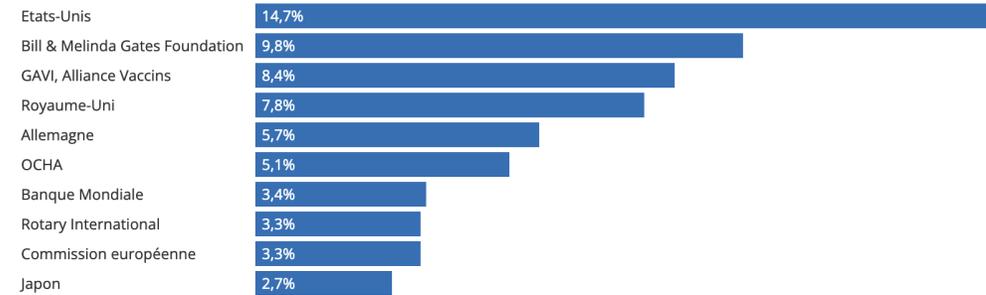
Bill Gates a-t-il trop d'influence sur l'OMS?



▲ La Fondation Bill et Melinda Gates est le deuxième plus grand donateur de l'Organisation mondiale de la santé. Certains s'inquiètent de l'influence prise par le fondateur de Microsoft. Keystone / Gian Ehrenzeller

Les 10 principaux donateurs de l'OMS

Contributions en % au budget de l'OMS



Chiffres pour la période 2018-2019

Source: OMS - [Récupérer les données](#)



Michel Jean-Dominique @MicheJeanDomi1 · 5 févr.



L'**OMS** n'est pas indépendante. 70 % de son **financement** est assorti de conditions. Le deuxième plus grand bailleur de fonds est Bill Gates, qui est fortement investi dans les actions de McDonald's, Coca Cola et l'industrie pharma.

Le public ne sait même pas qu'il ne sait pas.



Dr Aseem Malhotra  @DrAseemMalhotra · 5 févr. · 

‘ The WHO is not independent. 70% of its funding comes with strings attached. The second biggest funder is Bill Gates who is heavily invested in McDonald’s, Coca Cola and pharmaceutical industry stocks’

‘ The public don’t even know that they don’t know’

We’re being played [twitter.com/DrAseemMalhotr...](https://twitter.com/DrAseemMalhotra)



Didier Raoult  @raoult_didier · 16 mars 

La seule épidémie virale connue comme le résultat d'une manipulation humaine est la poliomyélite vaccinale par voie orale. Il n'y a eu que 8 cas dans le monde en 2022 de polio naturelle mais 800 à 1000 cas de polio dues au vaccin vivant.

 224  4 535  9 577  497,2 k 

[Afficher cette discussion](#)



Didier Raoult  @raoult_didier · 16 mars 

Le vaccin inactivé (DTP) que nous avons tous reçus ne présentait pas ces risques mais à cause de la politique OMS/Bill Gates, on observe les premiers cas de polio depuis 40 ans à New York, Londres et en Israël causés par ce vaccin qui diffuse partout. Bravo! Chacun son métier!

 71  2 039  5 335  174,2 k 



Didier Raoult  @raoult_didier · 16 mars 

Il ne faut pas se prendre pour Dieu parce qu'on est milliardaire.
polioeradication.org/wp-content/upl...



Alex Washburne @WashburneAlex · 5 mars

...

@JeremyFarrar used his authority as head of the @WellcomeTrust to modify language in the Proximal Origins paper & push @Nature to publish the seriously flawed study.

Imagine what he can accomplish at the @WHO!

Also, did any funders help Worobey/Pekar?

Dr. Farrar Led the Drafting Process and Made At Least One Uncredited Direct Edit to Proximal Origin

Dr. Farrar is not credited as having any involvement in the drafting and publication of Proximal Origin. According to new evidence obtained by the Select Subcommittee, Dr. Farrar led the drafting process and in fact made direct edits to the substance of the publication.

Right before publication, on February 17, 2020, Dr. Lipkin emails Dr. Farrar to thank him for leading the process of drafting Proximal Origin:

Thanks for shepherding this paper. Rumors of bioweapon engineering are now circulating in China.²¹

Dr. Farrar responds, confirming and saying that he will pressure *Nature* to publish:

Yes I know and in US – why so keen to get out ASAP. ***I will push nature.***²²

In addition to leading the drafting and publication process, Dr. Farrar made at least one direct edit to Proximal Origin. On February 17, 2020, the day Proximal Origin was first published publicly, Dr. Farrar made an edit to the draft:

Sorry to micro-manage/microedit! But would you be willing to change one sentence?

From

It is unlikely that SARS-CoV-2 emerged through laboratory manipulation of an existing SARS-related coronavirus.

To

It is improbable that SARS-CoV-2 emerged through laboratory



Hélène Banoun @BanounHelene · 14 févr.

...

Le nouveau directeur scientifique de l'OMS est celui qui a tout fait pour cacher l'origine du virus : à peine est-il nommé que l'OMS abandonne l'enquête sur cette origine!



Emily Kopp @emilyakopp · 14 févr.

A bad look for the WHO — to say the least — to appoint someone central to censoring concerns about a possible lab leak in early 2020 to chief scientist, then abandon your COVID origins investigation a few weeks later.

statnews.com/2022/12/13/who...

· COVID-19 · CONFLITS D'INTÉRÊT · EXCLUSIVITÉS COVIDHUB · DOSSIER OMS · OPINIONS, DEBATS

«Sous-financée, l'OMS est vulnérable»

Entretien avec Yasmine Motarjemi, spécialiste des toxi-infections alimentaires et lanceuse d'alerte, qui travaillé longtemps à l'OMS. Cette organisation doit être réformée d'urgence et remise au service de la santé des gens

11 juillet 2022 · Dernière mise à jour: 12 juillet 2022 · ❤️ 2 · 👁️ 520 vues



SPECIAL REPORT

How Bill Gates and partners used their clout to control the global Covid response — with little oversight

Four health organizations, working closely together, spent almost \$10 billion on responding to Covid across the world. But they lacked the scrutiny of governments, and fell short of their own goals, a POLITICO and WELT investigation found.



Comment Bill Gates et ses partenaires ont utilisé leur influence pour contrôler la riposte mondiale au Covid - avec peu de surveillance.

Quatre organisations de santé, travaillant en étroite collaboration, ont dépensé près de 10 milliards de dollars pour répondre au Covid à travers le monde. Mais elles n'ont pas été soumises à l'examen des gouvernements et n'ont pas atteint leurs propres objectifs, selon une enquête de POLITICO et WELT.

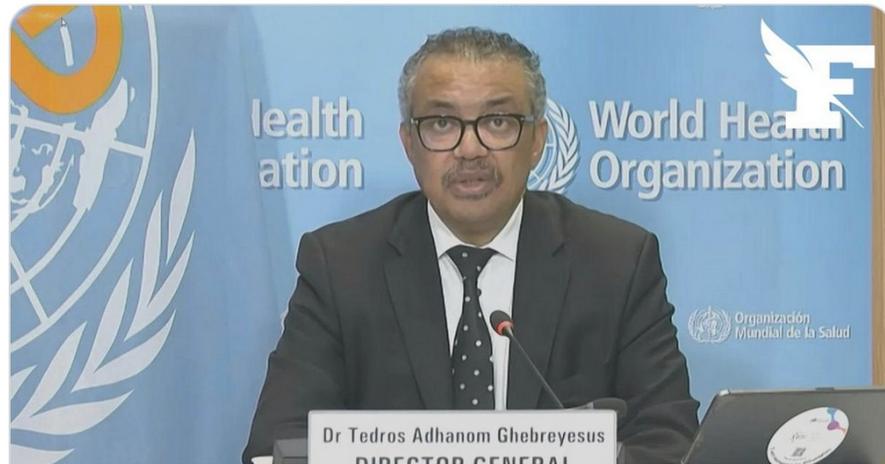


Philippe Murer   @PhilippeMurer · 23 mars

L'OMS accuse Elon Musk, de «fake news» sur le projet d'**accord** contre les **pandémies**.

✓ La réponse de l'OMS: vous perdrez bien votre souveraineté, mais c'est votre gouv't qui l'aura décidé et c'est pour votre bien.

En tout cas, Merci @elonmusk



lefigaro.fr

L'OMS accuse Elon Musk, sans le nommer, de «fake news» sur le pro...
L'OMS a accusé ce jeudi Elon Musk, sans le nommer, de propager des «fake news» après un tweet du multimilliardaire appelant les pays à ...



Jean Marc Morandini  @morandiniblog · 24 mars

L'OMS accuse Elon Musk, sans le nommer, de propager des "fake news" après un tweet appelant les pays à "ne pas céder de leur autorité" face au projet d'**accord** international visant à lutter contre les **pandémies**



jeanmarcmorandini.com

L'OMS accuse Elon Musk, sans le nommer, de propager des "fake ne...
L'OMS a accusé Elon Musk, sans le nommer, de propager des "fake news" après un tweet du multimilliardaire appelant les pays à "ne pa...

Twitter Files: Le projet de censure Virality, (incluant l'Université Stanford, des agences fédérales et des "ONG") ont surveillé les médias sociaux et qualifié des vérités sur les effets secondaires vaccins de "désinformation".



Matt Taibbi ✓ @mtaibbi · 17 mars

5. Just before @ShellenbergerMD and I testified in the House last week, Virality Project emails were found in the #TwitterFiles describing “stories of true vaccine side effects” as actionable content.

[Afficher cette discussion](#)

CDC in one week

- True content which might promote vaccine hesitancy
 - Viral posts of individuals expressing vaccine hesitancy, or stories of true vaccine side effects. This content is not clearly mis or disinformation, but it may be malinformation (exaggerated or misleading). Also included in this bucket are often true posts which could fuel hesitancy, such as individual countries banning certain vaccines.



Judicial Watch ⚖️🔒 @JudicialWatch · 21 mars



.@TomFitton: @ElonMusk @Twitter files show the **FBI** and other federal agencies was sending thousands of requests for censorship to @Twitter. They were sending so many requests that **Twitter** had trouble figuring out which agencies were sending which requests!



Feature » Social Media

Covid-19: Who fact checks health and science on Facebook?

BMJ 2021 ; 373 doi: <https://doi.org/10.1136/bmj.n1170> (Published 25 May 2021)

Cite this as: *BMJ* 2021;373:n1170

Feature » Medicine and the Media

Facebook versus the BMJ: when fact checking goes wrong

BMJ 2022 ; 376 doi: <https://doi.org/10.1136/bmj.o95> (Published 19 January 2022)

Cite this as: *BMJ* 2022;376:o95



Paul D. Thacker @thackerpd · 17 janv.

NEW EMAILS: Biden White House Behind Facebook Censorship of The BMJ's Pfizer Investigation disinformationchronicle.substack.com/p/new-emails-b... Months before The BMJ released investigation, Facebook emailed the White House they would take action against "true content" on vaccines /1

[Afficher cette discussion](#)

From: [REDACTED]@fb.com>
Sent: Sunday, March 21, 2021 11:25 PM
To: Slavitt, Andrew M. EOP/WHO [REDACTED]@who.eop.gov>
Cc: Flaherty, Rob EOP/WHO [REDACTED]@who.eop.gov>
Subject: [EXTERNAL] Follow up - Friday call w [REDACTED]

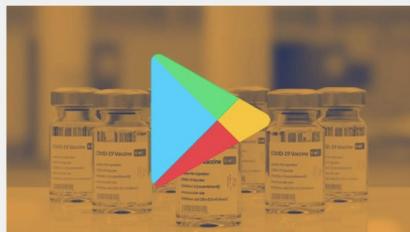
Andy,

Thanks for taking the time to connect on Friday. Per our discussion, I wanted to follow up with next steps:

- Consistent Product Team POC:** As discussed, we will make [REDACTED] who has been coordinating the product work that matters most to your teams, available on a regular basis. If it makes sense, we can schedule some time for [REDACTED] to connect with you and/or Rob (and whomever else makes sense) early this week.
- Sharing Additional Data:** [REDACTED] mentioned the new internal analytics that we are developing to help us understand and monitor the most viral COVID vaccine-related content. This is a top priority for us, and we will keep you updated on our progress and when we expect to be able to share the data with you.
- Lever for Tackling Vaccine Hesitancy Content:** You also asked us about our levers for reducing virality of vaccine hesitancy content. In addition to policies previously discussed, these include the additional changes that were approved late last week and that we'll be implementing over the coming weeks. As you know, in addition to removing vaccine misinformation, we have been focused on reducing the virality of content discouraging vaccines that does not contain actionable misinformation. This is often true content, which we allow at the post level because experts have advised us that it is important for people to be able to discuss both their personal experiences and concerns about the vaccine, but it can be framed as sensation, alarmist, or shocking. We'll remove these Groups, Pages, and Accounts when they are disproportionately promoting this sensationalized content. More on this front as we proceed to implement.
- WhatsApp:** Finally-- [REDACTED] mentioned the policies that apply to WhatsApp. WhatsApp's approach to misinformation focuses on limiting the virality of messages, preventing coordinated abuse, and empowering users to seek out reliable sources of information both in and out of the product. Our product includes features to limit the spread of viral content, such as forward limits and labels, privacy settings to help users decide who can add them to groups, and simple ways for users to block accounts and make reports to WhatsApp if they encounter problematic messages. Additional limitations we placed in April 2020 on forwarding of messages that have been forwarded many times reduced these kinds of messages by over 70%.

Along with these commitments, we'll continue to provide updated data from our COVID-19 Symptom Survey, and would be happy to walk through this data with our research director, if helpful.

Thanks again--and please let me know if there's anything I'm missing or can follow up to clarify.



Google élargit la censure et introduit de nouvelles règles

© uncut-news.ch | 📅 9 septembre 2022 | 🏷️ censure

📧 Nichts verpassen
Newsletter kostenlos abonnieren

Google veut interdire toutes les applications qui remettent en question la narratif médical dominant



› BIG PHARMA › MÉDIAS | ACTU

Pfizer partenaire de «la lutte contre la désinformation» sur Facebook

Depuis le début de l'épidémie, les utilisateurs du célèbre réseau social sont nombreux à se faire censurer. Le site d'investigation National Pulse révèle que, parmi les partenaires du géant bleu dans la lutte contre les soi-disant fake news, on trouve la très controversée entreprise pharmaceutique.

26 février 2022 · ❤️ 4 · 👁️ 1053 vues



Google

pfizer facebook mckinsey censorship



Tous Actualités Images Maps Vidéos Plus Outils

Environ 35 200 résultats (0,38 secondes)



Votre recherche a donné peu de résultats pertinents

Essayez d'utiliser des mots susceptibles de figurer sur la page que vous recherchez. Par exemple, "recettes de gâteaux" au lieu de "comment faire un gâteau".

Besoin d'aide ? Découvrez d'autres conseils concernant les recherches sur Google.



Michel Jean-Dominique @MichelJeanDomi1 · 24 nov. ...

FAITES DU BRUIT !!!

[@Facebook](#), [@Twitter](#), [@Google](#)
[@YouTube](#) et [@Microsoft](#) de [@LinkedIn](#)

ont tous censuré des informations [#COVID](#) précises provenant de scientifiques honnêtes et crédibles. Ils doivent des excuses aux Américains et au monde entier.



Martin Kulldorff @MartinKulldorff · 24 nov.

.[@Facebook](#), [@Twitter](#), [@Google's](#) [@YouTube](#) and [@Microsoft's](#)
[@LinkedIn](#) all censored accurate [#COVID](#) information from honest credible scientists. They owe Americans and the world an apology.



Corinne Reverbel 🇫🇷 @CorinneReverbel · 16 févr.

@RobertKennedyJr

"Les médias sont une extension de l'industrie pharmaceutique"

75 % des revenus publicitaires actuellement diffusés dans les médias grand public proviennent désormais de l'industrie pharma. - et ce ratio est encore plus élevé pour les informations du soir."

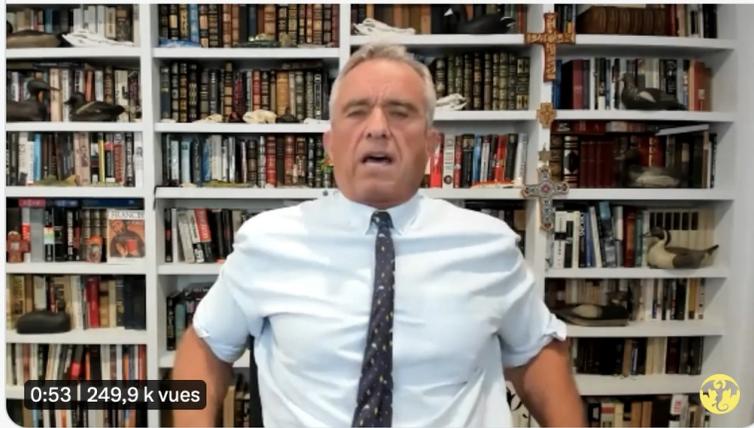


The Vigilant Fox 🇺🇸 @VigilantFox · 16 févr.

.@RobertKennedyJr: "The Media Is an Extension of the Pharmaceutical Industry"

"75% of advertising revenues now on the mainstream media are now coming from pharma — and that ratio is even higher for the evening news."

"Anderson Cooper has a \$12 million a year annual salary.... [Voir plus](#)
[Afficher cette discussion](#)



Laurent Mucchielli @LMucchielli · 12 mars

Mea Culpa du grand journal 🇩🇪 Der Spiegel "Nous savons maintenant que de nombreuses mesures pandémiques étaient absurdes, excessives, illégales. Pas une page glorieuse, pas même pour nous les médias". Les journalistes 🇫🇷, si compromis, en sont incapables



spiegel.de

(S+) Verbote in der Coronapandemie: Wir Coronaversager – Kolumne
Inzwischen wissen wir, dass viele Pandemiemaßnahmen unsinnig, überzogen, rechtswidrig waren. Kein Ruhmesblatt, auch nicht für un...



Phil Kerpen  @kerpen · 1 mars



Miller-Meeks: It wasn't until I came to Congress that I found out infection acquired immunity was a novel concept.

Kulldorff: Yeah I guess we knew about it since 430BC of the Athenian Plague until 2020. And we didn't know about it for three years. And now we know about it again.





The Epoch Times ✓ @EpochTimes · 3h



“A public official narrative was established, and you weren’t allowed to question it,” says Dr. [@MartinKulldorff](#), one of the most qualified public health pandemic experts in the US.

“Both science and public health are broken.”



theepochtimes.com

EXCLUSIVE: Former Harvard Prof. Martin Kulldorff: 'Science and Publi...
Dr. Martin Kulldorff is one of the most qualified public health pandemic experts in the United States. To ...