



Former Chief Science Officer for Pfizer: ‘Second Wave’ is Faked

From a truly objective scientific view, a second wave was not predicted nor has it materialized. However, the Technocrat narrative has completely overridden science to perpetuate the “Great Panic of 2020” to drive vaccines to the world’s population.

In this case, Dr. Mike Yeadon might be considered a whistleblower of sorts as he defies Big Pharma’s hollow rhetoric and says the “pandemic is over”. Establishment media will not give a single inch of coverage to his analysis. □ TN Editor

In a stunning development, a former Chief Science Officer for the pharmaceutical giant Pfizer says “there is no science to suggest a second wave should happen.” The “Big Pharma” insider asserts that false positive results from inherently unreliable COVID tests are being used to manufacture a “second wave” based on “new cases.”

Dr. Mike Yeadon, a former Vice President and Chief Science Officer for Pfizer for 16 years, says that half or even **“almost all” of tests for COVID are false positives**. Dr. Yeadon also argues that the threshold for herd immunity may be much lower than previously thought, and may have been reached in many countries already.

In an interview last week Dr. Yeadon was asked:

“we are basing a government policy, an economic policy, a civil liberties policy, in terms of limiting people to six people in a meeting...all based on, what may well be, completely fake data on this coronavirus?”

Dr. Yeadon answered with a simple “yes.”

Dr. Yeadon said in the interview that, given the “shape” of all important indicators in a worldwide pandemic, such as hospitalizations, ICU utilization, and deaths, “the pandemic is fundamentally over.”

Yeadon said in the interview:

“Were it not for the test data that you get from the TV all the time, you would rightly conclude that the pandemic was over, as nothing much has happened. Of course people go to the hospital, moving into the autumn flu season...but there is no science to suggest a second wave should happen.”

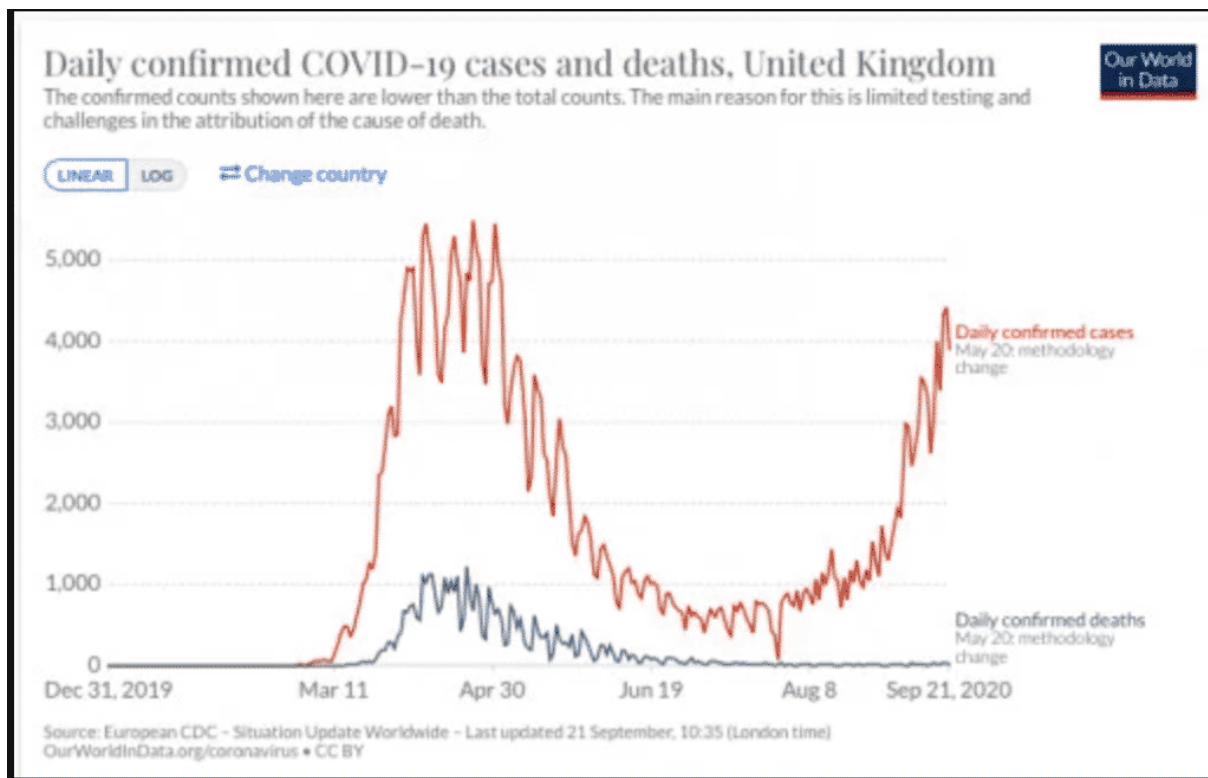
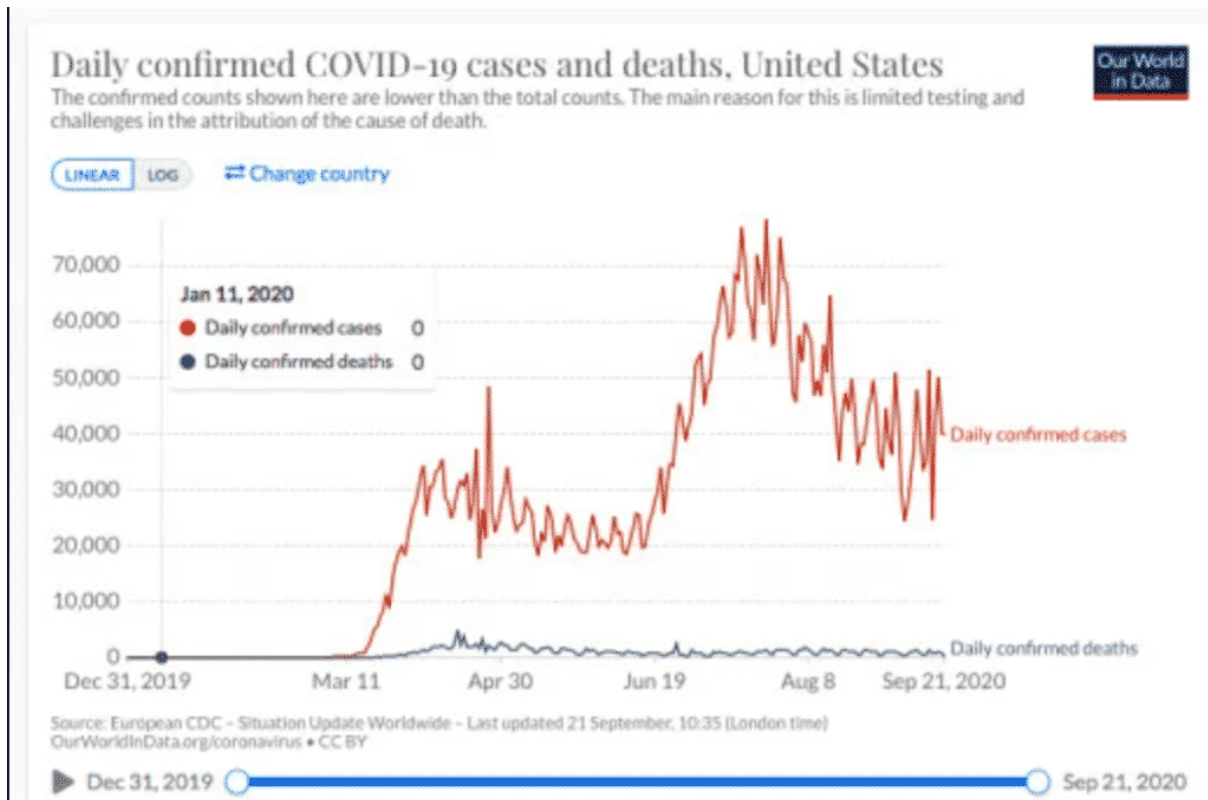
In a paper published this month, which was co-authored by Yeadon and two of his colleagues, “How Likely is a Second Wave?”, the scientists write:

“It has widely been observed that in all heavily infected countries in Europe and several of the US states likewise, that the shape of the daily deaths vs. time curves is similar to ours in the UK. Many of these curves are not just similar, but almost super imposable.”

In the data for UK, Sweden, the US, and the world, it can be seen that in all cases, deaths were on the rise in March through mid or late April, then began tapering off in a smooth slope which flattened around the end of June and continues to today. The case rates however, based on

testing, rise and swing upwards and downwards wildly.

Media messaging in the US is already ramping up expectations of a “second wave.”



Survival Rate of COVID Now Estimated to be 99.8%, Similar to

Flu, Prior T-Cell Immunity

The survival rate of COVID-19 has been upgraded since May to 99.8% of infections. This comes close to ordinary flu, the survival rate of which is 99.9%. Although COVID can have serious after-effects, so can flu or any respiratory illness. The present survival rate is far higher than initial grim guesses in March and April, cited by Dr. Anthony Fauci, of 94%, or 20 to 30 times deadlier. The Infection Fatality Rate (IFR) value accepted by Yeadon *et al* in the paper is .26%. The survival rate of a disease is 100% minus the IFR.

Dr. Yeadon pointed out that the “novel” COVID-19 contagion is novel only in the sense that it is a new type of coronavirus. But, he said, there are presently four strains which circulate freely throughout the population, most often linked to the common cold.

In the scientific paper, Yeadon *et al* write:

“There are at least four well characterised family members (229E, NL63, OC43 and HKU1) which are endemic and cause some of the common colds we experience, especially in winter. They all have striking sequence similarity to the new coronavirus.”

The scientists argue that much of the population already has, if not antibodies to COVID, some level of “T-cell” immunity from exposure to other related coronaviruses, which have been circulating long before COVID-19.

The scientists write:

“A major component our immune systems is the group of white blood cells called T-cells whose job it is to memorise a short piece of whatever virus we were infected with so the right cell types can multiply rapidly and protect us if we get a related infection. Responses to COVID-19 have been shown in dozens of blood samples taken from donors before the new virus arrived.”

Introducing the idea that some prior immunity to COVID-19 already existed, the authors of “How Likely is a Second Wave?” write:

“It is now established that at least 30% of our population already had immunological recognition of this new virus, before it even arrived...COVID-19 is new, but coronaviruses are not.”

They go on to say that, because of this prior resistance, only 15-25% of a population being infected may be sufficient to reach herd immunity:

“...epidemiological studies show that, with the extent of prior immunity that we can now reasonably assume to be the case, only 15-25% of the population being infected is sufficient to bring the spread of the virus to a halt...”

In the US, accepting a death toll of 200,000, and an infection fatality rate of 99.8%, this would mean for every person who has died, there would be about 400 people who had been infected, and lived. This would translate to around 80 million Americans, or 27% of the population. This touches Yeadon’s and his colleagues’ threshold for herd immunity.

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