

Of COVID and Covetousness

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A crisis as grave, prolonged and far-reaching as the current COVID pandemic could not fail to have many consequences in the medical, social and political domains, as much as in the global economy where its effects are nothing less than catastrophic. The repeated contradictions, inconsistencies and backtracking by major western governments on almost every aspect of the crisis, whether medical or social, have left the public in a state of disbelief, anger and cynicism.

A general complaint is that decisions were made abruptly, with no open consultations or coherent explanations, within closed and often anonymous circles of 'experts' whose criteria for selection appear arbitrary since equally or better qualified colleagues had very different opinions and proposals for the sanitary strategies to be followed. Many of those medical authorities point out that, after many years of advocating exercise in the open air, a varied diet, a stimulating lifestyle with many social interactions as conditions for good health, the people in charge of tackling the COVID-19 virus suddenly came to enforce the exact opposite measures for adults and children: confinement in closed spaces even when in hot climates, isolation from family and friends, suppression of all forms of entertainment and outdoor sports and dietary restrictions resulting from the effective limitations on shopping options and on monetary income.

Some cynics went so far as to say that many governments appeared to have tested, with the complicity of mass media, the resilience of their citizens against chronic illness and mental depression by reducing them to the worst possible conditions under a 24-hour bombardment of anguishing news about COVID infections and deaths all over the world, in an endless enumeration of individual anonymous cases, without making the distinction between infections (often asymptomatic) and grave afflictions.

A telling demonstration of the desire of certain medical and/or political authorities to 'keep the pot boiling' is provided by that fact that in France a new epidemic spike was announced in certain areas because the number of detected 'infections' had reached 50 per 100,000 people. Yet since 1985, the epidemic threshold for viral respiratory afflictions like the flu to be declared epidemic is set at 150 to 200 cases per 100,000. What was the point of dividing this percentage in three?

In the Belgo-French e-magazine *le Vif*, physician Dr. Daniel Rodenstein wrote (July 29, 2020) that state-sponsored propaganda has (deliberately?) ‘confused epidemic with a mortal threat’. Yet even in Belgium which had the highest per capita number of casualties in Europe, the annual death rate is barely above the average, even though many of the deceased were victims of lack of care, medical neglect and probably the fear and despair caused by the social and economic conditions created by the lockdown. What to say of the USA which does not have half of Belgium’s fatalities per capita?

In the USA, the bitter political war between the supporters of Donald Trump and his opponents has played a very visible part in the dramatization of the pandemic turned into the battle horse of Democrats against a Republican Administration which attempted to first deny and then underrate the extent of contagions in order to shelter the economy from damage and protect its own reputation. While there was a genuine emergency back in April in the State of New York and some others, the current situation does not warrant the fear-mongering hysteria that liberal media are fostering.

In an article entitled, *Is America’s second corona wave a political hoax?* (July 20, 2020), analyst F. William Engdahl has pointed out the misleading nature of the rates of ‘infection’ rattled off by most newspapers and TV networks at the behest of the very politicized Centre for Disease Control which, in spite of a 90% fall in fatalities since April, continues to report a rapidly increasing number of ‘PIC cases’ (PIC stands for pneumonia, flu and COVID-19 lumped together under the Covid bracket).

The alleged ‘cases’ are in fact mostly ‘positive’ results for unreliable tests performed on people who don’t feel ill. Such tests are then taken as a basis for expanding the net of probability to up to 15 other individuals having been in contact with the ‘Covid suspect’. Engdahl further reports that many labs in the electorally critical state of Florida reported almost 100% positive tests and when challenged revealed that in some cases they had ‘mistakenly’ multiplied the percentage tenfold. There is no escaping the fact that COVID has become a major source of funding and profits in so many sectors of the economy which have no intention of killing the goose that lays the golden eggs.

In an article carried by the widely circulated French magazine *France-Soir* (August 4, 2020), anthropologist Jean-Dominique Michel accuses pharmaceutical labs of ‘systemic corruption’ and of ‘mafia-like’ collusion with government bodies and with many physicians. He qualifies the policies adopted as ‘terribly destructive’ and refers to the study conducted by the team of Prof. Ioannidis of Stanford University in early April at the peak season of the ‘pandemic’ which showed that both contagiousness and lethality were no

higher than those of some more acute seasonal influenzas and that most infected persons did not even notice it.

Like many others, Michel points out that many of the drastic measures were indeed illegal under national legislations and EU laws (for one it has been established that in France it is unlawful to fine people for not wearing a mask whereas in Spain the Constitution, particularly vigilant against state authoritarianism, prohibits 'locking down' law-abiding people). He also notes that a majority of deaths (two thirds in the UK) were caused by either lack of proper treatment of the pulmonary infection or by non-treatment of other grave pathologies, not to mention the many suicides caused by depression or by social and economic distress and even a 30% increase in road accidents often involving drivers wearing masks.

The great profiteers apart from the giant GAFAM (Google, Apple, Facebook, Amazon and Microsoft) are of course the pharmaceutical companies which made what Michel calls 'obscene benefits'. To quote him: 'The (pharma) industry has required shorter time-frames and less delays to thoroughly analyse proof (of the efficacy and safety) of new drugs; it has resulted in an increase in hospitalizations and deaths. Fulfilling the needs of pharmaceutical companies has been given priority over the needs of patients. If such corruption of regulatory provisions is not stopped the situation will continue to worsen'.

He adds; "...The state of systematic corruption... is such that a pharma company can indeed, without a valid medical or pharmaceutical reason, make a Minister change the labelling of a medicine at the very moment when it can be a saviour". He cites here the well-known case of Hydroxychloroquine on which we will come back subsequently in this article. His mention of the major social media platforms is significant because we know that Facebook in particular uncritically reflect and spread the officially endorsed versions of the COVID situation and its therapies which censor alternative perspectives and views, even when voiced by health professionals. They try to block opinions skeptical about or opposed to vaccinations and instead of providing space for free debate they are indeed enforcers of the status quo in the name of combating 'conspiracy theories'.

While certain medical professionals like Dr. Thierry Gouvenec have written about the irrational panic and obsession created by the COVID alert, comparing it to the bizarre waves of collective madness recorded at various periods in history in many parts of the world, the very typical policy of mainstream media and social media giants has been to condemn, ridicule and shut down without discussion those who dissent from the official diagnosis by accusing them of betraying right-wing extremist ideology, mental disorders, anti-social behaviour and a shocking lack of empathy and sense of

responsibility. This is typical of witch hunts and other mass repressions of those individuals who don't conform with a uniform belief and way of life.

Among the aforesaid beneficiaries, companies doing research on vaccines are on top of the pile. As part of its 'Operation Warp Speed' the Trump Administration has given itself discretionary power to pick and choose the businesses to be lavishly funded against the promise of producing a vaccine ASAP. Apart from signing a \$2 billion contract with Pfizer in association with a German company, the US Biomedical Advanced Research and Development Authority has pumped \$1.6 billion into Novavax, a corporation which has not produced a vaccine in the last thirty years.

On his side, Bill Gates has also expended very large amounts on an unsuccessful vaccine venture which has so far, according to Robert Kennedy Jr.'s foundation, Children's Health Defense, only made a large number of monkeys sick. One of the most depressing aspects of this pharmaceutical gold rush is that it involves the torture and murder of thousands of captive simians and other animals as biologically close as possible to the human species and kept in dismal conditions in lab cages, all to produce vaccines that may be unnecessary by the time they reach the market, and that will be refused by a large proportion of the population concerned about their potentially harmful effects.

It is all a reflection of the wastefulness, cruelty and insensitivity of our allegedly advanced civilization founded on human rights and respect for life. In the article quoted above, Dr. Michel reports that the European Union has ordered from SANOFI (the very company which asked the French Minister to declare Hydroxychloroquine a 'dangerous' substance in 2018) a 'very speculative' vaccine based on 'messenger RNA' which modifies the genome of those to whom it is given by means of an as yet untested and potentially risky technology involving the use of GMOs. Unsurprisingly the accelerated access to market of this vaccine entails short-circuiting testing procedures and providing exceptional immunity to the manufacturers in case of side effects, he comments.

Recent mass protests and demonstrations in Europe (Germany, France, Spain, Britain etc...) and America have evinced the anger of large sections of the population against the harsh, oppressive, arbitrary and counter-productive policies of their respective governments. Many physicians, virologists and epidemiologists, some very eminent in their specialties, have come together to raise very serious accusations against health authorities and the political leaderships which acted on their advice. These include ACU in Germany, Medival Collective for Truth in Spain and Frontline Doctors in the USA.

They charge their respective governments of causing tens of thousands of unnecessary deaths. They do not deny the existence of a dangerous and widespread infectious pathology, contrary to what their opponents and critics allege, but make several important and scientifically irrefutable points based on their medical experience and on publicly available confirmed data. In brief, the main charges are:

[1] The governments, under the erratic and confused guidance of the WHO, reacted too late to the warnings about the viral epidemic and then abruptly imposed extreme measures that created great distress and harm to the general population, particularly to serious patients who were often left to their fates without care or recourse to hospitalization; many needed surgical interventions. Old age home residents were put at grave risk of contagion and death from other causes when they were abandoned by their caregivers and relatives were not allowed to reach them. Many were left to die and in France at least the government went so far as to prescribe ‘end of life’ medications (Rivotril and Clonazepam) for those regarded as too weak and sick to be treated in the circumstances. Not a few whistleblowers, including writer Jean-Claude Manificier (Plumenclume.org, 31/7/2020) have accused those who took such decisions of administrative murder.

[2] Many underline that the source and nature of the COVID-19 virus have not been properly investigated and no official interest has been paid to the scientific indicators pointing to an artificial origin and a possible accidental leak from a research facility. Specialists such as epidemiologist Alexandra Henrion-Caude suspect that political factors may have dissuaded state authorities from encouraging and publicizing results supporting that thesis. When the disease first struck Italy, for instance, no autopsies of the casualties were allowed and hence it took more time for physicians to discover that the cause of death was not pulmonary but vascular.

[3] The decision to declare the health crisis a ‘pandemic’ according to the regulation adopted by the WHO in 2009 contributed to spreading a climate of worldwide panic even though the number of fatal cases never reached the minimal statistical frequency required for the disease to be clinically defined as a pandemic. The WHO had decided in 2009 that any infection affecting most countries, even if there were only a few mild occurrences in many of them, would qualify as a pandemic; this arbitrary label may have worsened the impact instead of helping to tackle it effectively.

[4] The unprecedented decision to impose prolonged universal confinement in a very large number of countries was not in conformity with tested health strategies which only prescribe selective individual or group isolation and do not envisage locking up healthy individuals and families. There are evident

conflicts with the elementary notion of individual freedoms and rights to free movement and gainful or leisurely activity of legitimate character.

The western democracies, always eager to claim scrupulous respect of liberty, arrogated to themselves dictatorial authority equivalent to war powers on the highly contestable ground that people had to be kept 'safe' by force in order to prevent hospital facilities from being overwhelmed. Violating their own constitutional laws, they invoked the questionable principle that everyone is responsible for the health of everyone else and should cease and desist from any activity and interaction outside the home for an indefinite period of time, even if that led to malnutrition, individual ruin, family breakup and severe physical and mental harm.

In many countries, people living in relatively isolated locations were not allowed to take walks in couples or alone in nature or in empty spots, and were severely punished and sometimes physically assaulted by police for doing so. The absurdity of such tyrannical measures beggars belief.

On the basis of a study conducted at Johns Hopkins University, both UNICEF and the very controversial and substantially discredited WHO, have admitted that the confinement policy and its enduring effects may cause the death of some 10,000 children a month worldwide.

[5] As if all this was not already a 'tale told by an idiot full of sound and fury', most western countries were theatres of a bitter, indeed mortal conflict between physicians and public figures about the treatment to be applied to COVID patients. The early and successful prescription of hydroxychloroquine (Hcq) by, among others, Prof. Didier Raoult, an eminent specialist of infectious pathologies at Marseille University Hospital, generated a storm of accusations of quackery against him from many of his colleagues who were eventually found and reported to be on the payroll of major pharmaceutical corporations by investigative journalists. They used the classification of Hcq as a hazardous drug in France since December 2019 (despite its commonplace prescription for many decades against malaria, lupus and other afflictions) to accuse Raoult of risking the lives of his patients, as if he had no qualifications or experience in his profession.

The media became the echo chamber of their attacks; on March 26 the French Pharmaceutical Agency (ANDM) forbade its use 'except for grave cases under strict hospital supervision'. Raoult declared repeatedly to the press that he was shocked by the violence of what he called 'collective madness' against him and a mundane inexpensive medicine available for decades over the counter. It turned out that he had received anonymous death threats emanating from a clinical centre headed by a highly paid consultant to the US pharmaceutical giant, Gilead. This politically influential firm (which had Donald Rumsfeld on

its board before he became US Secretary of Defence), vigorously promotes its expensive and unproven drug Remdesivir against Covid-19, and even got the US government to buy all its production for a gigantic sum.

Several other eminent physicians in many countries, such as Dr. Christian Peronne, have since come out in support of Raoult and of the Hcq treatment, while the scientific studies (including the infamous one carried by *The Lancet*) that purported to demonstrate its inefficacy and even lethality have been discredited as they relied on trumped up and spurious data. A much larger number of clinical surveys confirmed the opposite. As a result of this debacle, the French Government reversed its March ban on Hcq and made its prescription legal once again in July. However, even now mainstream media mentions it as a controversial, dangerous and unproven drug and refers to Raoult as some kind of a mad witch doctor.

President Trump took the Hcq preventively in the face of a rabid reaction from US medical authorities who in some instances claimed he was putting his health and America's security at risk by reckless adoption of an allegedly toxic treatment. Trump so far has remained healthy and President Bolsonaro of Brazil, who also took it, recovered in a few days from his reported COVID infection, further embarrassing the transnational anti-Hcq lobby.

[See: an [open letter addressed](#) by a number of American medical practitioners to Dr. Fauci whose opposition to Hcq had a decisive impact]

[6] The almost universal decision that as many people as possible need to be tested and that all recent contacts of those found positive are to be tracked and tested as well has proven to be highly questionable since experts agree that the best of tests are inaccurate and that many, though officially recognized, don't meet the minimal standards of reliability. People can be diagnosed positive simply because they were earlier vaccinated against the flu or were exposed to another, innocuous Covid virus strain. 'False negatives' are more dangerous than 'false positives' but the latter cause distress, anguish and hardship even though a selective application of better tests might have been preferable to the wrong headed policy of general indiscriminate confinement and lockdown.

Many scientists, including Peronne and Raoult and Belgian nutritionist Martine Fallon, have stated on the record that they suspect that business arrangements between governments and test-kit manufacturers behind closed doors influenced the choices in the accreditation and selection of such tests. Despite the uncertainty, several countries are now requiring travellers to undergo such intrusive tests on arrival or provide evidence that they took one less than 72 hours earlier, even though infection could well have occurred in the interval.

[7] An even bigger controversy is brewing over the all-out global race to develop a vaccine for COVID-19, given the poor record of previous attempts to make effective vaccines for earlier Corona-caused infections. In 2014, Helene Ecochard wrote on the investigative website, *Mediapart*, about the riskiness of many vaccines, especially new ones, given that their effects on the host organism stretch over years and are often unknown.

The enormous sums of money provided by various governments to corporations and labs to find the miracle prophylactic in a context of acute economic crisis, has generated controversy and cynicism. Many states are competing to reach the goalpost first rather than collaborating, causing avoidable duplication of efforts and likely waste of vaccines produced in hundreds of millions of doses before any proof of efficacy could be secured. In the process, reciprocal accusations of hacking, espionage and attempts to steal research results are rife, particularly between the habitual geopolitical rivals.

The new cold war pervades the supposedly philanthropic and non-partisan medical field. A widespread fear is that whatever vaccine gets official approval will be made compulsory, whether free or not. Bill Gates is the most famous advocate of universal vaccination and certification as a precondition for allowing people access to public services and facilities, betraying his totalitarian bent of mind, reminiscent of the *'ausweiss'* (permit to go outside) imposed by Nazis in countries under their occupation.

Clearly mankind is falling under the control of a coalition of influential scientific laboratories, oligarchic high-tech firms and leading political powers intending to regulate populations under the questionable guidance of computerized analyses and projections involving new technologies (Artificial Intelligence, 5 and 6G communications, electronic surveillance, Big Data, Deep Learning and predictive algorithms). In the name of protecting 'safety and security', this globalist ideology leads its hegemonic promoters to put in place a dictatorship of 'science and health' (in service of Big Capital) that brooks as little opposition as its more primitive tyrannical predecessors. The human community must be aware of this prospect and come up with ways of reacting to it for the greater good.



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