

Proof That Face Masks Do More Harm Than Good

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Sunday Times Bestselling Author

This short book contains conclusive proof that face masks do more harm than good, and being forced to wear them is a form of oppression designed to have adverse physical and psychological effects upon the wearer rather than having any protective value.

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Second Edition

The Author

Dr Vernon Coleman MB ChB DSc was the first qualified medical practitioner in the UK to question the significance of the ‘crisis’ now described as covid-19, telling readers of his website www.vernoncoleman.com at the end of February that he felt that the team advising the Government had been unduly pessimistic and had exaggerated the danger of the virus. At the beginning of March, he explained how and why the mortality figures had been distorted. And on March 14th, he warned that the Government’s policies would result in far more deaths than the disease itself. In a YouTube video recorded on 18th March, he explained his fear that the Government would use the ‘crisis’ to oppress the elderly and to introduce compulsory vaccination. And he revealed on his website and in subsequent videos that the infection had been downgraded on March 19th 2020 when the public health bodies in the UK and the Advisory Committee on Dangerous Pathogens decided that the ‘crisis’ infection should no longer be classified as a ‘high consequence infectious disease’. Just days after the significance of the infection had been officially downgraded, the Government published an Emergency Bill which gave the police extraordinary new powers and put millions of people under house arrest. Dr Coleman, a former GP principal, is a *Sunday Times* bestselling author. His books have sold over two million copies in the UK, been translated into 25 languages and sold all around the world. He has given evidence to the House of Commons and the House of Lords, and his campaigning has changed Government policy. There is a short biography at the back of this book. Some references have been given in this book in view of the misleading information widely available online as part of the demonization process now being used to attack those questioning the ‘official’ line. Vernon Coleman’s first book about the coronavirus, *Coming Apocalypse*, was only accepted for publication after all specific references to coronavirus and covid-19 were removed. (Careful editing worked in alternative words and phrases.) Vernon Coleman’s second book about the coronavirus hoax (a collection of the transcripts of the videos broadcast between April and September) was titled, *Covid-19: The Greatest Hoax in History*. The book was banned within days of publication. A second version of the same book titled, *Old Man in a Chair* was banned within hours of publication. Vernon Coleman then published an eBook version of *Old Man in a Chair* on Smashwords, unfortunately, this too was banned. That book is now available through korsgaardpublishing.com

A Thank You Note

My sincere thanks go to all those who have supported and encouraged my fight to share the truth about the coronavirus hoax. You are too numerous to mention by name but my thanks to you all.

‘Those who would give up essential liberty, to purchase a little temporary safety, deserve neither liberty nor safety.’
Benjamin Franklin

Introduction

To my horror and disappointment the shops, and indeed the streets, are full of mask-wearing muppets. In the shops everything takes an age as shopper and assistant struggle to make themselves heard through their masks. The muppets have become mumblies.

Many mask wearers keep their masks on even when out of doors, where it is not yet mandatory to do so. These over-compliant collaborators are making oppression easy for the totalitarians who will doubtless soon be demanding that we all wear our masks wherever we are and whatever we are doing – even in our own homes.

Most mask wearers have no idea of the harm they are doing by wearing masks. Indeed, many seem to understand very little about how to wear a mask. I have, on several occasions, seen people drop their mask onto the pavement – face side down of course – pick it up and put it on. Many people wear the same mask for more than two hours (which is dangerous), wear disposable masks more than once (which is dangerous), fail to wash cloth masks (which means they accumulate bacteria, fungi and viruses – all of which are breathed in) touch their mask while it is in position (which makes the mask even worse than useless), put masks into their pockets or handbags and then put them back on creased and grubby (a very dangerous thing to do since the wearer will then be breathing in whatever bugs have been transmitted to the mask. Scarves are often used as face coverings without ever being washed (an effective way to catch throat and lung infections). Nearly everyone constantly fiddles with their masks – not realising that touching a mask is something you should not do. The incidence of throat and chest infections is going to rocket. I wonder how many people will be killed by their masks. We'll never know.

What the hell has happened to people? I am appalled at how easily people have become so compliant and have accepted the Government lies. Many mask wearers now choose their masks as fashion items and wear masks designed to match their outfits. A few wear dark glasses and gloves as well as masks. I fear they probably think they look cool and well-dressed.

As I said earlier, it won't be long before the Government will order people to wear masks in the home. And they will. Some will sleep in them – and doubtless die in them.

Most mask wearers are clearly being made ill by their masks. Because their oxygen levels are low, their eyes are glazed, as though they are drugged.

When the covid-19 hoax began, authorities around the world announced that mask wearing was pointless, and it was widely agreed by experts that they could probably do more harm than good. Indeed, mask wearing was dismissed as 'virtue signalling' by Dr Fauci, the American coronavirus expert. The World Health Organisation supported this general view which was in accordance with the available scientific evidence. Medical advisors around the world agreed that there was no need to wear masks.

Later during the year, the story changed.

Although there did not seem to be any scientific evidence supporting such a dramatic change, the World Health Organisation suddenly supported face mask wearing. Almost instantly, governments around the world, led by medical and scientific advisors, changed their views overnight and decided that we should all wear masks. The WHO's main financial supporter is the American software billionaire Bill Gates who has a number of powerful alliances with media organisations (such as the BBC), strong financial links with Monsanto and a number of drug companies, and an enthusiasm for vaccination which, to put it politely, does not seem justified by the evidence.

Why, in the absence of a change in medical advice did the WHO change its mind?

Well, it seems that the campaign for masks to be worn worldwide was either founded by the World Economic Forum, which advocates a global reset and of which that well-known ‘medical expert’ Prince Charles of England appears to be a leading member, or by an organisation called masks4all. The promotion of masks was supported by Goldman Sachs, the bank, in my view one of the most evil companies on earth (along with Google and Monsanto) which was once memorably described by Matt Taibbi as a vampire squid on the face of humanity. The bank is reported to have claimed that if everyone in America wore a mask, the American economy would be boosted.

I have no idea how they came to this conclusion or why they think their advice is better than medical research.

The masks4all website promotes the slogan, ‘Anyone without a mask puts you and your family at risk’, and masks4all is a fiscally sponsored project of something called Community Initiatives which seems to have links to a whole range of organisations I’ve never heard of.

As a result of the WHO’s change of advice, media throughout the world also changed their advice. The well-known video sharing site called YouTube betrayed users by deleting videos made by doctors (such as myself) which offered scientific evidence proving that masks are of no value but are dangerous.

I could find no convincing scientific evidence supporting this change of heart but, as a result of the WHO’s about-turn, populations everywhere were forced to wear masks – or to risk being fined. Only those prepared to self-certify that they could not wear a mask were allowed to travel on trains or buses or any other form of public transport without a face covering. And shortly afterwards, the rule was extended to cover shops and public buildings. Strangely, people in offices were not always forced to wear masks – as though the coronavirus were in some way inactive in a working environment but active in a shopping environment.

I have kept this book short and have resisted the mild temptation to include a history of mask wearing in all its various forms. The only thing that is important at the moment is whether mask wearing is useful and necessary or dangerous and being forced upon us as part of the new totalitarianism.

I repeat, I have yet to find any reliable scientific evidence proving that masks are useful, safe or worth wearing. Many doctors who are not employed by governments or public agencies, seem to agree that mask wearing is very likely to do far more harm than good.

The available scientific evidence shows that masks, whatever their form, provide a poor obstacle to infective organisms but do impede air intake and oxygen exchange.

Those who wear masks are collaborating in a massive conspiracy.

Important Note: My first video in March 2020 was entitled, *Coronavirus Scare – the Hoax of the Century?*. What I meant by this, and have subsequently made clear on many occasions, is not that the existence of covid-19 itself is a hoax, but that the exaggerated, fraudulent response was unnecessary, harmful and deliberately designed to over-sell a not unusual seasonal virus infection. The covid-19 infection is merely a standard flu heavily marketed for a specific purpose: the lockdowns, the social distancing, the masks, and the vaccines were never necessary, and it is not difficult to prove that these measures have done infinitely more harm than good and will, in due course, result in far more deaths than covid-19.

If this really were a pandemic, there would have been no need for governments to fiddle the covid death figures. For example, if someone dies within 28 or 60 days of having had a positive PCR test (a test that is known to have a high rate of false positives) then that person is automatically put down as a covid death. That is fraud. It is not unknown for the ordinary flu to kill 650,000 people globally in a single, six month flu season but today the flu has

virtually disappeared but the mainstream media appears to have failed to make this pretty obvious connection.

There would have been no need for governments and the media to lie, lie and lie again. And, most important of all, there would have been no need to silence, suppress and demonise all those wishing to question the officially promoted lies. Never, in history, has medical debate been so effectively oppressed and doctors wishing to share simple truths been so ruthlessly silenced. It is also worth remembering that many of the so-called fact checkers are nothing of the sort. There are now hundreds of self-acclaimed fact checkers around the world, and many of them receive huge donations from individuals, corporations and charities with views and vested interests to protect. Many of the fact checkers seem to be employed largely to suppress the truth and to discredit those who are sharing the truth.

The day after my first video appeared on YouTube, my Wikipedia page was changed dramatically to discredit me. And shortly after that, the video was removed. Subsequently, hundreds of videos made by myself and other independent doctors have been removed though the views of pro-establishment celebrities, with no medical knowledge or understanding, have been promoted vigorously. Similarly, it has become impossible to find publishers prepared to print material questioning the official line – and that is why *Proof that Masks Do More Harm than Good* has been privately published.

Anyone who wants to know why all this has happened will find the answers in my book, *Endgame: The Hidden Agenda 21*.

Masks and Mask Wearing: 111 Facts You Must Know

1.

Surgeons have been using surgical masks since their introduction in 1897. It has for some years been customary for surgeons and nurses to wear surgical masks in the operating theatre and to change masks part of the way through any procedure lasting more than a few hours.

The dangers associated with mask wearing were assessed by five doctors and published in the journal *Neurocirugia* in 2008.

Although it is customary for operating theatres to be fitted with air conditioning systems, the writers of the article, entitled, *Preliminary Report on Surgical Mask induced Deoxygenation During Major Surgery*, pointed out that it is known that heat and moisture are trapped beneath surgical masks and concluded that ‘it seems reasonable that some of the exhaled carbon dioxide may also be trapped beneath them, inducing a decrease in blood oxygenation’.

A total of 53 surgeons, of both sexes, all employed at university hospitals and aged between 24 and 54 years of age were tested. All were non-smokers and none had any chronic lung disease. The test involved pulse oximetry before and after the course of an operation. The study showed that the longer a mask was worn the greater the fall in blood oxygen levels. This may lead to the individual passing out and it may also affect natural immunity – thereby increasing the risk of infection.

The masks used were disposable, sterile, one-way surgical paper masks. To eliminate the effect of dehydration over a several hour surgical operation, the surgeons were allowed after every hour to drink water through a straw.

The authors of the paper concluded that, ‘When the values for oxygen saturation of haemoglobin were compared, there were statistically significant differences only between preoperational and post operational values. As the duration of the operation increases, oxygen saturation of haemoglobin decreases significantly.’

2.

This quote is taken from *New England Journal of Medicine*: ‘We know that wearing a mask outside health care facilities offers little, if any, protection from infection. Public health authorities define a significant exposure to covid-19 as face to face contact within six feet with a patient with symptomatic covid-19 that is sustained for at least a few minutes (and some say more than 10 minutes or even 20 minutes). The chance of catching covid-19 from a passing interaction in a public space is therefore minimal. In many cases the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.’ The reference: M. Klompas, C. Morris et al ‘Universal Masking in hospitals in the covid-19 era’ – *New England Journal of Medicine* 2020

3.

It is possible that wearing a mask for hours at a time could cause pulmonary fibrosis. In August 1988, the proceedings of the VIIth International Pneumoconioses Conference included details of three cases of pulmonary fibrosis, thought to be due to exposure to synthetic textile fibres. The first was a woman of 52 who had a dry cough with increasing

difficulty in breathing. Changes were visible on an X-ray. The woman had been working in a textile shop for 15 years where her job was measuring and cutting cloth – mainly synthetic materials. The second patient was a woman of 66 who also had difficulty in breathing. The lungs of this patient also showed X-ray changes. She was also involved in cutting and measuring synthetic fabrics. A third woman, aged 47, had bilateral pulmonary fibrosis. Studies have shown that loose fibres are seen on all types of masks and may be inhaled causing serious lung damage.

4.

People who cough and sneeze into their mask increase the risk of a build-up of fungi and bacteria – which can lead to dangerous chest infections.

5.

In 2015, the *British Medical Journal* published a paper entitled, *A Cluster Randomised Trial of Cloth Masks Compared with Medical Masks in Healthcare Workers*. The paper was written by nine authors from the University of New South Wales, the University of Sydney, the National Institute of Hygiene and Epidemiology in Vietnam and the Beijing Centers for Disease Control and Prevention in China. The aim of the study was to compare the efficacy of cloth masks to medical masks in hospital health care workers. The study, which was extensive, concluded that the results caution against the use of cloth masks.

‘This is an important finding to inform occupational health and safety,’ concluded the authors. ‘Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection.’

And the authors added: ‘...as a precautionary measure, cloth masks should not be recommended for health care workers, particularly in high risk situations, and guidelines need to be updated’.

6.

Many individuals have turned their masks into fashion items. I wonder how many wear the same mask day after day without washing them. If masks are unwashed then they become breeding grounds for bacteria, fungi and viruses. If they are washed then they become even more useless (if that is possible) than they were when new. The enthusiasm for ‘fashion’ masks, which match other items of clothing, is rising. But wearing a fashionable mask is akin to a slave painting their chains to look pretty.

7.

The word ‘covering’ is now often used in official propaganda material, having replaced the word ‘mask’. It has clearly been decreed more acceptable than the more usual word ‘mask’ which carries worrying overtones.

8.

It is often difficult to hear what people say when they are wearing masks – particularly if the masks are close-fitting. Conversations are kept to a minimum and social interactions in shops and other establishments are functional at best. (It is worth noting that hairdressers and others in service industries have been instructed to talk as little as possible – ostensibly to prevent

the spread of the virus. Also, singing, a joyful activity for singers and listeners, has been banned.)

9.

Mask wearers have been encouraged by the psy-op specialists employed by governments to show their hatred for non-mask wearers. This loathsome ploy was first promoted by Ms Dick of the Metropolitan police in London, and seems designed to make those who cannot or do not wear masks feel guilty and ashamed. The mentally and physically disabled will, therefore, be harassed and abused if they dare to go out of their homes.

10.

In October 2020, it was noticeable that when street photographs were published in the press or online, they invariably showed members of the public wearing masks – even though mask wearing out of doors was not compulsory. Were the public being conditioned for the time that wearing masks outdoors becomes mandatory?

11.

Symptoms caused by mask wearing are now being wrongly blamed on covid-19. It seems likely that when mask wearing starts to result in deaths (as it will do), those deaths will be blamed on covid-19 and used as a reason for politicians and advisors to demand that people wear masks for even longer hours. The vicious circle will be complete.

12.

The Occupational Safety and Health Administration in the US has decreed that any room where the carbon dioxide is present at a level or more than 5,000 parts per million is unsafe and has an environment which is toxic and dangerous. Carbon dioxide levels normally exist at between 350 and 450 parts per million. Acceptable indoor quality level is 600 to 800 ppm. Any employer who attempts to force employees to work in an environment where the carbon dioxide level is too high can be held to account. Similarly, any teacher who attempts to force children to study in such an environment would be legally responsible. If a nuclear submarine has a level of over 5,000 parts per million then it must surface because it is considered to have a threatening and dangerous environment. There is much dispute about the levels of carbon dioxide which may develop if a mask is worn. Generally, the tighter a mask fits the greater the risk that the level of carbon dioxide will rise to dangerous levels but it must be remembered that most members of the public have no training on how to wear a mask and there are few if any restrictions on mask manufacture. Indeed, members of the public are making their own masks and using bits of left over material to do so. A wide variety of masks are being designed and worn. Those dismissing the danger as non-existent might like to read HSE Contract Research Report no 27/1991, produced by the British Health and Safety Executive and entitled, *Dead space and inhaled carbon dioxide levels in respiratory protective equipment*. Those dismissing the risks associated with carbon dioxide levels should know that the amount of carbon dioxide in a small room can easily rise to levels which are dangerous enough to have a dramatic effect on decision making. At least eight studies in the last decade have studied carbon dioxide levels indoors and have found worrying levels above 1,200 parts per million.

13.

Women giving birth in France have to wear face masks. In my opinion, this is dangerous and will put extra strain on the heart. Pregnant women should not wear a mask, not only because of the risk to themselves but because of the risk to their unborn child. There is a real risk that the baby will be stillborn or in some way damaged or poorly developed at birth.

14.

Research conducted by four French doctors in 2018 and reported in *Rev Mal Respir*, was designed to evaluate the effect of wearing a surgical mask during a six minute walking test. The authors of the study were E. Person, C. Lemerrier, A. Royer and G. Reychler. (The six minute walking test is regularly used in pulmonology.)

For this research, 44 health subjects were used. Each individual performed two six minute walking tests – one with a mask and one without a mask.

The researchers found that dyspnoea variation was significantly higher with a surgical mask, and concluded that the difference was clinically relevant.

The conclusion was that ‘wearing a surgical mask modifies significantly and clinically dyspnoea.’

15.

Mask wearers, of a sanctimonious nature, will sometimes claim that they wear masks not to protect themselves but to protect other people. This is simple-minded nonsense since, as has been well demonstrated in this book, face masks are of no value to anyone and, indeed, can be a menace both to those wearing them and to those maskless people they meet.

16.

Vital evidence outlining the dangers and ineffectiveness of mask wearing has been banned, blocked or deleted from the internet. Videos assessing the value of wearing face masks on the basis of the scientific evidence have been removed. Discussion and debate about the value of face masks are suppressed by politicians and the media. Research material outlining the dangers of mask wearing has been removed from the internet on the basis that ‘it is no longer relevant in our current climate’. So-called ‘fact-checkers’ invariably dismiss medical reports published by doctors and scientists – however eminent those experts might be. The so-called ‘fact-checkers’ are often linked to commercial organisations or groups with commercial links. No one seems to check the ‘fact-checkers’ – though they should.

17.

Between 2004 and 2016, at least twelve articles appeared in medical and scientific journals showing that face masks do not prevent the transmission of infection.

18.

There are no strict rules about what constitutes a face mask, and the rules about when and where masks should be worn are constantly changing. This proves that there is no science supporting the wearing of masks. So, for example, it is clearly absurd that the coronavirus should be thought to spread from person to person in a shop but not in an office.

19.

The tighter a mask fits the more likely it is to reduce blood oxygen levels and to increase the amount of carbon dioxide being inhaled. It should be noted that optimal oxygen intake in humans should, according to the US Occupational Safety and Health Administration, be between 19.5 and 23.5% and that any human-occupied airspace where oxygen measures less than 19.5% should be labelled as not safe for workers. However, the percentage of oxygen inside a masked airspace generally measures 17.4% within seconds of putting on the mask. A tighter fitting mask will result in lower oxygen levels and higher carbon dioxide levels. Lower oxygen levels and increased levels of carbon dioxide stimulate greater inspiratory flow – leading to a greater risk that loose fibres from the face mask will be inhaled.

20.

In Belgium, in September 2020, a group of 70 doctors sent an open letter to Ben Weyts, the Flemish Education Minister in which they claimed that children are badly affected by having to wear face masks. ‘Mandatory face masks in schools are a major threat to their development,’ they wrote. ‘It ignores the essential need of the growing child. The well-being of children and young people is highly dependent on emotional attachment to others.’

(Observing facial expressions help a child’s social development and so seeing those around them wearing masks must therefore delay a child’s development.)

According to *The Brussels Times*, the doctors continued that ‘there is no large-scale evidence that wearing face masks in a non-professional environment has any positive effect on the spread of viruses, let alone on general health. Nor is there any legal basis for implementing this requirement.’

‘Meanwhile, it is clear that healthy children living through covid-19 heal without complications as standard and that they subsequently contribute to the protection of their fellow human beings by increasing group immunity.’

‘The only sensible measure to prevent serious illness and mortality caused by covid-19 is to isolate individual teachers and individual children at increased risk,’ they added. ‘This risk assessment is not the task of the Ministry of Education but the task of the treating physicians in consultation with their patients.’

21.

Leading German virologist Professor Streeck has criticised the use of masks, which he has said are a wonderful breeding ground for bacteria and fungi. He has also criticised lockdowns.

22.

Two dentists in New York have reported seeing a number of patients with inflamed gums and other problems. The news story was reported in the *New York Post*.

‘We’re seeing inflammation in people’s gums that have been healthy forever, and cavities in people who have never had them before,’ said dentist Rob Ramondi. ‘About 50% of our patients are being impacted by this, (so) we decided to name it ‘mask mouth’.’

Another dentist, Marc Sclafani, told the *New York Post* that ‘gum disease, or periodontal disease, will eventually lead to strokes and an increased risk of heart attacks.’

The dentists said that the problem is caused by the fact that face coverings increase mouth dryness and contribute to a build-up of bad bacteria.

‘People tend to breathe through their mouth instead of through their nose while wearing a mask,’ said Sclafani. ‘The mouth breathing is causing the dry mouth, which leads to a decrease in saliva – and saliva is what fights the bacteria and cleanses your teeth.’

23.

Masks diminish the quality of our relationships with other people. We trust people less if they are wearing masks. We cannot see smiles and so we fear people more.

24.

When the truth finally comes out about the dangers of masks, teachers making children wear masks in schools will be sued. Bosses making their employees wear masks will also be sued. Ignorance is no defence. And as the Nuremburg defendants discovered, the reply ‘I was obeying orders’ is no defence.

25.

A 26-year-old man suffered a collapsed lung after running 2.5 miles while wearing a face mask. Doctors say his condition was caused by the high pressure on the man’s lung due to his intense breathing while wearing the face mask. When masks are made mandatory outdoors in the UK, joggers and cyclists will have no choice but to wear masks. Many will die.

26.

Never in history have so many people worn masks obstructing their intake of air. A considerable amount of research has been done into mask wearing. The research shows clearly that masks are ineffective in preventing the movement of infective organisms but that they reduce oxygen levels and increase levels of carbon dioxide. Most of those advocating mask wearing are either ignorant or are deliberately exposing mask wearers to danger. The side effects of excess carbon dioxide (hypercapnia) are headaches, dizziness, drowsiness, nausea, vomiting and a tight feeling in the chest. The risks are usually dismissed as irrelevant or non-existent by government spokesmen and fact checkers (many of whom are sponsored by industry) but I found it impossible to find reliable scientific evidence supporting this reassurance. It should be noted that the BBC, which claims to produce fact checking material, has financial links to the Bill and Melinda Gates Foundation (which itself has strong financial links to the vaccine industry among others) and is in my view entirely untrustworthy. The question, as always, is a simple one: who will check the ‘fact checkers’?

Government defenders regard the removal of a video from YouTube as a sign that the advice in the video must have been ‘wrong’. The reality, of course, is the exact opposite since YouTube takes down material which disagrees with advice from the World Health Organisation which is now heavily sponsored by the Bill and Melinda Gates Foundation.

27.

Streets are littered with discarded face masks which ought to have been incinerated as medical waste, if this really were a highly dangerous virus. It is important to note that, on March 19th 2020, the public health bodies and the Advisory Committee on Dangerous

Pathogens decided that covid-19 should no longer be classified as a ‘high consequence infectious disease’ – the link for the proof of this is on my website www.vernoncoleman.com. A couple of days after this decision, the UK Government introduced lockdowns and introduced the most oppressive Bill in British Parliamentary history.

28.

It was reported in *The Sydney Morning Herald* in 2003, that retailers who cash in on community fears about SARS by exaggerating the health benefits of surgical masks could face fines of up to \$110,000. NSW Fair Trading Minister Reba Meagher warned that distributors and traders could be prosecuted if it was suggested the masks offered unrealistic levels of protection from the disease. ‘There appears to be some debate about whether surgical masks are able to minimise the effects of SARS.’ Ms Meagher said her department would investigate any complaints about false mask claims which concerned the public.

Health authorities have warned that surgical masks may not be an effective protection against the virus. ‘Those masks are only effective so long as they are dry,’ said Professor Yvonne Cossart of the Department of Infectious Disease at the University of Sydney. ‘As soon as they become saturated with moisture in your breath they stop doing their job and pass on the droplets.’ Professor Cossart said that could take as little as 15 or 20 minutes, after which the mask would need to be changed.’

29.

Does wearing a face mask reduce your immunity levels? No one seems to know the answer for sure but it seems possible that if people wear face masks for long periods (months or years) then the absence of contact with the real world might well have a harmful effect on immunity – if the face mask works. Do face masks prevent us developing immunity to particular diseases? This depends on many factors – mainly the effectiveness of the face mask. But if the mask isn’t preventing the development of immunity then it probably isn’t worth wearing anyway.

30.

It is widely acknowledged that wearing a face mask may give a false sense of security and may stop the wearer taking other precautions – such as washing their hands. Also, it has been established that if masks aren’t worn properly, and changed regularly, they can do much more harm than good.

31.

There is no doubt that face masks can be dangerous. In China, two school boys who were wearing face masks while running on a track both collapsed and died – possibly, I would surmise, because the strain on their hearts by the shortage of oxygen proved fatal. According to the German doctor, Dr Bodo Schiffmann, at least three other children may have died in Germany due to mask wearing.

32.

A report published in the *British Medical Journal* summarised some other risks. First, when you wear a face mask some of the air you breathe out goes into your eyes. This can be

annoying and uncomfortable and if, as a result, you touch your eyes you may infect yourself. Second, face masks make breathing more difficult and, as I have already pointed out, anyone who has a breathing problem will find that a mask makes it worse. Also, some of the carbon dioxide which is breathed out with each exhalation is then breathed in because it is trapped. Together these factors may mean that the mask wearer may breathe more frequently or more deeply, and if that happens then someone who has the coronavirus may end up breathing more of the virus into their lungs. If a mask is contaminated because it has been worn for too long then the risks are even greater. How long is too long? No one knows but two hours seems an accepted limit. No research has been done as far as I know. Third, there is a risk that the accumulation of the virus in the fabric of the mask may increase the amount of the virus being breathed in. This might then defeat the body's immune response and cause an increase in infections – other infections, not just the coronavirus.

33.

Dr Russell Blaylock, a retired neurosurgeon, has reported that wearing a face mask can produce a number of problems varying from headaches to hypercapnia (a condition in which excess carbon dioxide accumulates in the body) and that the problems can include life-threatening complications. Symptoms of hypercapnia include drowsiness, dizziness and fatigue. Some of the carbon dioxide exhaled with each breath is retained behind the mask and then breathed in again.

Dr Blaylock has also warned of neurological problems. 'By wearing a mask, the exhaled viruses will not be able to escape and will concentrate in the nasal passages, enter the olfactory nerves and travel into the brain,' he wrote.

And Dr Blaylock has warned of the danger to patients with cancer. 'People with cancer, especially if the cancer has spread, will be at a further risk from prolonged hypoxia as the cancer grows best in a microenvironment that is low in oxygen. Low oxygen also promotes inflammation which can promote the growth, invasion and spread of cancers. Repeated episodes of hypoxia have been proposed as a significant factor in atherosclerosis and hence increases (the risk of) all cardiovascular and cerebrovascular diseases.'

34.

The risk of side effects developing when wearing a mask depend to some extent on whether the mask is made of cloth or paper or is an N95 mask filtering out at least 95% of airborne particles. One study of 212 healthcare workers showed that a third of them developed headaches with 60% needing painkillers to relieve the headache. Some of the headaches were thought to be caused by an increase in the amount of carbon dioxide in the blood or a reduction in the amount of oxygen in the blood. Another study, this time of 159 young health workers, showed that 81% developed headaches after wearing face masks – so much so that their work was affected.

35.

An N95 mask can reduce blood oxygenation by as much as 20% and this can lead to a loss of consciousness. Naturally, this can be dangerous for vehicle drivers; masked bus drivers, for example, could be putting their passengers' lives at risk.

36.

Dr Blaylock has pointed to a study entitled, *The use of masks and respirators to prevent transmission of influenza: a systematic review of the scientific evidence*. This study looked at 17 separate studies and concluded that none of the studies established a conclusive relationship between the use of masks and protection against influenza infection. ‘When a person has TB we have them wear a mask,’ concluded Dr Blaylock, ‘not the entire community of the non- infected.’

Dr Blaylock has also described how mask wearing can affect immunity. ‘...a drop in oxygen levels (hypoxia) is associated with an impairment in immunity,’ he has written. ‘Studies have shown that hypoxia can inhibit the type of main immune cells used to fight viral infections called the CD4+T- lymphocyte. This occurs because the hypoxia increases the level of a compound called hypoxia inducible factor-11 (HIF-11) which inhibits T-lymphocytes and stimulates a powerful immune inhibitor cell. This sets the stage for contracting any infection, including covid-19, and making the consequences of that infection much graver. In essence, your mask may very well put you at an increased of infections and if so, having a much worse outcome.’

37.

Visors have one important advantage over masks. The evidence shows clearly that although masks are useless at preventing the spread of infection they are potentially extremely dangerous. On the other hand, although visors are just as useless as masks at preventing the spread of infection they are at least relatively free of danger and are, therefore, the face coverings of choice for those who feel the need to wear one. The fact that governments allow citizens to use visors proves beyond any shadow of doubt that the whole mask wearing scam is just that – a scam. The aim is to obtain psychological control rather than to control disease.

38.

Dr M Griesz-Brisson MD PhD is a leading European consultant neurologist and neurophysiologist. In October 2020, she warned that rebreathing our exhaled air, because of wearing masks, will create oxygen deficiency and an excess of carbon dioxide in the body. ‘We know,’ she said, ‘that the human brain is very sensitive to oxygen deprivation. There are nerve cells in the hippocampus that cannot last longer than three minutes without oxygen.’ Dr Griesz-Brisson pointed out that the acute warning symptoms of oxygen deprivation are headaches, drowsiness, dizziness, difficulty in concentration and slowing down of reaction times. The real danger is, however, that when the oxygen deprivation becomes chronic, the symptoms disappear because the body gets used to them. However, efficiency remains impaired and the damage to the brain continues. ‘We know that neurodegenerative disease takes years to decades to develop. If today you forget your phone number, the breakdown in your brain would have already started two or three decades ago.’

Dr Griesz-Brisson explains that while the mask wearer thinks that they are becoming accustomed to re-breathing exhaled air, the problems within the brain are growing as the oxygen deprivation continues.

She also points out that brain cells which die, because of a shortage of oxygen, will never be replaced. They are gone for ever. She goes on to argue that everyone is entitled to claim exemption from mask wearing because oxygen deprivation is so dangerous – and masks don’t work.

Finally, Dr Griesz-Brisson points out that children and teenagers must never wear masks, partly because they have extremely active and adaptive immune systems but also because

their brains are especially active and vulnerable. The more active an organ is the more oxygen it needs. And so the damage to children's brains is huge and irreversible.

She warns that dementia is going to increase in ten years, and the younger generation will not be able to reach their potential because of the mask wearing.

Oxygen deprivation adversely affects the heart and the lungs but it also damages the brain. And the damage will be permanent.

'My conclusion has to be that no one has the right to force us to deprive our bodies of oxygen for absolutely no good reason. Depriving individuals of oxygen is a crime perpetrated by those demanding that we wear masks. Those who let it happen and those who collaborate are also guilty. And those who wear masks in situations where they are not legally required are cooperating in a criminal activity.'

Inevitably, Dr Griesz-Brisson's interview was removed from YouTube as part of the global suppression of medical information.

39.

The nasal flu vaccine, the one given to children, contains attenuated or weakened live viruses. It is possible that if a child has a weakened immune system – as would doubtless be the case if they'd been imprisoned and kept indoors a lot or had for absolutely no good reason been wearing a mask for a long time – then the attenuated virus in the vaccine might cause the flu. Because attenuated viruses aren't quite dead, they could change or even become live and they could mutate and they could result in other people being infected. So it is possible that a child who has the nasal flu vaccine could transmit the flu virus to Granny – who might die as a result.

40.

Many doctors now believe that masks are being used as a conditioning tool to make us more compliant. Most people dutifully wear them, wrongly believing that their masks will protect them from the coronavirus, and without any idea of the damage that is being done to their physical and mental health. All around the world citizens have proved to be extraordinarily obedient and gullible, pathetic even, accepting the lies and deceits quite freely. Social distancing and the wearing of masks are both likely to be long-term and possibly permanent, and the physical and mental damage done is also likely to be long-term and permanent.

41.

The rules about mask wearing change from time to time and from one area to another (proving that there is no science behind mask wearing) and we never quite know what punishments to expect. In one part of America you could be sent to prison for a year if you failed to wear a mask. In another part of America you had to pay a 2,000 dollar fine but there was no prison sentence. In Texas, some people have been told that they should wear masks in their own homes. In one shop a guard pulled a gun on a man who was not wearing a mask.

42.

The Chinese wear masks routinely – to protect themselves from pollution. But the masks appeared to make no difference to the spread of the coronavirus in China.

43.

Economists, professors of anything, engineers, bankers, teachers, company directors and golf course management executives are all of one mind: we must all wear our masks. Astonishingly, and inexplicably, the media is giving yards of print space and many broadcasting hours to these people but denying space or time to experienced, well-qualified doctors who simply want to provide truth, scientific evidence and common sense. The few doctors who toe the 'party line' on the covid-19 hoax are guaranteed huge amounts of publicity.

44.

Will masks become part of the new world religion (widely known to its supporters as Chrislam)?

45.

In a paper published in *MedRxiv.2020* entitled, *Physical interventions to interrupt or reduce the spread of respiratory viruses*, T. Jefferson, M. Jones et al concluded that compared to not wearing a mask there was no reduction of influenza-like illnesses when health care workers or the general population wore masks.

In March 2020, Dr Jenny Harries, Deputy Chief Medical Officer in the UK, warned that it is possible to trap the virus in a mask and start breathing it in. She said that wearing a mask was not a good idea.

46.

A meta-analysis published in May in 2020 by the Centers for Disease Control was entitled, *Non-pharmaceutical measures for pandemic influenza in non-healthcare settings – personal protective and environment measures*. The authors concluded that the evidence from randomized controlled trials of face masks did not support a substantial effect on the transmission of laboratory-confirmed influenza, either when worn by infected persons or by persons in the general community to reduce their susceptibility.

47.

In May 2016, a meta-analysis written by J. Smith and C. MacDougall and published in the *Canadian Medical Association Journal* concluded that both randomised controlled trials and observational studies of N95 respirators and surgical masks used by health care workers, did not show any benefit against the transmission of acute respiratory infections. The authors also concluded that acute respiratory infection transmission may have occurred via the contamination of provided respiratory protective equipment during storage and through the reuse of masks and respirators during the working day.

48.

In 2019, a scientific paper written by L.Radonovich and M.Simberkoff was published in the *Journal of the American Medical Association*. The paper was entitled, *N95 respirators vs medical masks for preventing influenza among health care personnel: a randomized clinical trial*. The study involved 2,862 volunteers and showed that both surgical masks and N95

respirators 'resulted in no significant difference in the incidence of laboratory confirmed influenza'.

49.

In 2011, a meta-analysis of 17 separate studies regarding masks and the effect on the transmission of influenza found that none of the 17 studies established a conclusive relationship between mask or respirator use and protection against influenza infection. The study was conducted by F. bin-Reza, V. Lopez et al.

50.

It was proved in 1920 that cloth masks fail to impede or stop flu virus transmissions. It was concluded that the number of layers of fabric required to prevent pathogen penetration would require a suffocating number of layers and could not be used. It was also recognised that there was a problem of leakage around the edges of cloth masks.

51.

A paper entitled, *Use of surgical face masks to reduce the incidence of the common cold among health workers in Japan: a randomized clinical trial* was published in the *American Journal of Infection Control* in June 2009. The authors concluded that face mask use was found not to be protective against the common cold when compared to controls who did not wear face masks.

52.

In 2009, investigators studied masks for an article published in the *Journal of Occupational Environmental Hygiene*. The authors concluded that for both N95 masks and surgical masks, expelled particles were deflected around the edges of the masks and that there was measurable penetration of particles through the filter of each mask.

53.

A paper entitled, *Face coverings, aerosol dispersion and mitigation of virus transmission risk*, written by M. Viola, B. Peterson et al, was published in 2005. The authors concluded there have been farther transmissions of virus-laden fluid particles from masked individuals than from unmasked individuals, by means of leakage jets, including backward and downward jets that may present major hazards. All masks were thought to reduce forward airflow by 90% or more over wearing no mask; however Schlieren imaging showed that surgical masks and cloth masks resulted in a greater upward airflow past the eyebrows than occurred in individuals not wearing masks at all. Backward unfiltered air flow was found to be strong with all the masks tested, compared to individuals not wearing masks. In other words, if a person wearing a mask has an infection then the risk of being infected is high for anyone standing behind the wearer.

54.

A paper by H. Jung and J. Kim, which was entitled, *Comparison of filtration efficiency and pressure drop in anti-yellow sand masks, quarantine masks, medical masks, general masks*

and handkerchiefs, was published in *Aerosol Air Qual Res* in June 2013. The paper studied 44 mask brands and found that the average penetration was 35.6%. Even most medical masks had over 20% penetration. Most importantly, the study found that general masks and handkerchiefs had no protective function in terms of aerosol filtration efficiency.

55.

A study published in 2015 in the *British Medical Journal* by C. MacIntyre, H. Seal et al, entitled, *A cluster randomised trial of cloth masks compared with medical masks in healthcare workers* found that penetration of cloth masks by particles was almost 97% while penetration of medical masks was 44%. The authors showed healthcare workers wearing cloth masks had significantly higher rates of influenza-like illness after four weeks of using masks at work – when compared to controls.

56.

It is widely assumed that surgeons and operating theatre staff must wear masks but a paper by N. Mitchell and S. Hunt entitled, *Surgical face masks in modern operating rooms – a costly and unnecessary ritual* which was published in the *Journal of Hospital Infection* in July 1991– found no difference in wound infection rates with and without surgical masks. Other scientific research papers have established similar conclusions. There was, for example, a paper published in 2015 in the *Journal of the Royal Society of Medicine* by C DaZhou, P Sivathondan et al. The paper was entitled, *Unmasking the surgeons: the evidence base behind the use of facemasks in surgery*.

57.

No one should wear a mask while exercising. There have been several reports of masked children dying while exercising. There is evidence showing that mask wearing reduces blood oxygen levels even when the wearer is standing still. Also, individuals who exercise are likely to sweat. Masks then become damp more quickly and the damp promotes the growth of microorganisms.

58.

S. Bae and M. Kim et al published a paper in April 2020 in the journal *Annals Internal Medicine* 2020. The title of their paper was, *Effectiveness of surgical and cotton masks in blocking SARS CoV 2: A controlled comparison in 4 patients* and they concluded that ‘neither surgical nor cotton masks effectively filtered SARS-CoV-2 during coughs by infected patients’.

59.

It is not just out of politeness that surgeons and dentists traditionally remove their masks when talking to patients. They do so because they know that patients and relatives find it more reassuring, and more comforting, to see a whole human face rather than just part of one. Moreover, it is often exceedingly difficult to understand what someone is saying when they are wearing a mask.

60.

‘The face mask traps warm moisture that is produced when we exhale,’ says dermatologist Dr Maggie Kober. ‘For those with acne, this can lead to acne flares. For many others, this warm, moist environment surrounding skin creates the perfect condition for naturally occurring yeast and bacteria to flourish and grow more abundant. This overgrowth of yeast and bacteria can produce angular cheilitis, the cracking and sores at the corners of the mouth.’

Face masks can also present a risk of contact dermatitis and can increase the risk of staph infections.

61.

In June 2020, researchers suggested that the oxygen reduction and carbon dioxide build up (hypercapnia) might put a considerable strain on the heart, lungs, kidneys and immune system. This risk has not been disproven. The paper was written by B. Chandrasekaran, S. Fernandes and entitled, *Exercise with facemask: are we handling a devil’s sword – a physiological hypothesis*.

62.

Research has shown that respirators and masks contained influenza bugs found on their outer surfaces. The risk was higher the longer the masks were worn. It has also been established that bacteria accumulate on masks – and those bacteria can cause lung infections.

63.

Mask wearers are more likely to develop an infection than non-mask wearers. This is most likely to be a result of the wearer breathing in their own heavily contaminated air and, therefore, developing bacterial pneumonia. Infections may also be due to the fact that masks reduce blood oxygen levels and adversely affect natural immunity. It is likely that anyone who wears a face mask for long periods will have a damaged immune system – and be more susceptible to infection. Studies have shown that hypoxia can inhibit immune cells used to fight viral infections. Wearing a mask may make the wearer more likely to develop an infection – and if an infection develops it is likely to be worse. Low oxygen levels reduce T cells and therefore reduce immunity levels.

64.

‘Is a mask necessary in the operating theatre?’ by N. Orr, published in *Annals Royal College of Surgeons England* in 1981, found no difference in wound infection rates whether or not surgeons wore surgical masks.

65.

Thousands of years ago, it was discovered that forcing people to wear masks covering much of their faces broke their will and made them subservient. The masks depersonalised the wearers and dehumanised them too.

66.

Dr Scott Atlas, White House coronavirus advisor, claimed that face coverings are not effective in stopping the virus's spread. He tweeted, 'Masks work? NO' alongside a link to an article that argued against the success of face coverings. Twitter removed his tweet.

67.

Children are now demanding to be allowed to wear masks (so that they look 'grown up') and some are even fitting masks onto their dolls. Parents do not seem aware that children are especially vulnerable to the brain damage which will inevitably be a result of the hypoxia that is induced by mask wearing.

68.

In some parts of the world (particularly parts of the United States of America) it is compulsory to wear a mask even while exercising. This is particularly dangerous and will lead to a dramatic increase in the number of people dying while exercising.

69.

CIA torture techniques include forcing people to remain isolated (as in lockdowns), to keep their distance from others (social distancing) and to wear masks.

70.

A paper in the journal, *Ophthalmology and Therapy* (published in September 2020), written by Majid Moshirfar, William B. West Jr and Douglas P. Marx warned of an increase in dry eye symptoms among mask wearers. Those using masks regularly for extended periods are more likely to show symptoms. The condition is caused by exhaled air blowing upwards from the mask into the eyes. The increased airflow causes irritation or inflammation. The authors conclude 'this mask-associated ocular irritation raises concerns about eye health and increased risk of disease transmission in prolonged mask users'. Their advice is that lubricant eye drops should be used and goggles should be worn.

Dry eyes lead to individuals rubbing their eyes which will lead to an increase in the risk of infection.

Doctors and opticians are also reporting an increase in the number of patients complaining of persistent headaches – because of mask wearing.

71.

Those who defend mask wearing claim that the practice must be safe because surgeons and operating theatre staff wear masks. But operating theatres are climatically controlled, masks are replaced every couple of hours, and those working in an operating theatre do not rush around doing their shopping. It is important to remember that surgeons who wear masks (and not all do) work while standing, rather than walking, and they work in a controlled, air conditioned environment. They do not touch their masks and they change them regularly. Indeed, Physician, Dr J. Meehan MD, who has performed over 10,000 surgical procedures, has this to say to those who argue that, 'If masks don't work, then why do surgeons wear them?'

'Although surgeons do wear masks to prevent their respiratory droplets from contaminating the surgical field and the exposed internal tissues of our surgical patients, that

is about as far as the analogy extends... The covid-19 pandemic is about viral transmission. Surgical and cloth masks do nothing to prevent viral transmission. We should all realize by now that face masks have never been shown to prevent or protect against viral transmission. Which is exactly why they have never been recommended for use during the seasonal flu outbreak, epidemics, or previous pandemics. If a surgeon were sick, especially with a viral infection, they would not perform surgery as they know the virus would NOT be stopped by their surgical mask. Another area of “false equivalence” has to do with the environment in which the masks are worn. The environments in which surgeons wear masks minimize the adverse effects surgical masks have on their wearers. Unlike the public wearing masks in the community, surgeons work in sterile surgical suites equipped with heavy duty air exchange systems that maintain positive pressures, exchange and filter the room air at a very high level, and increase the oxygen content of the room air. These conditions limit the negative effects of masks on the surgeon and operating room staff. And yet despite these extreme climate control conditions, clinical studies demonstrate the negative effects (lowering arterial oxygen and carbon dioxide re-breathing) of surgical masks on surgeon physiology and performance. Surgeons and operating room personnel are well trained, experienced, and meticulous about maintaining sterility. We only wear fresh sterile masks. We don the mask in a sterile fashion. We wear the mask for short periods of time and change it out at the first signs of the excessive moisture build up that we know degrades mask effectiveness and increases their negative effects. Surgeons NEVER re-use surgical masks, nor do we ever wear cloth masks. The public is being told to wear masks for which they have not been trained in the proper techniques. As a result, they are mishandling, frequently touching, and constantly reusing masks in a way that increase contamination and are more likely than not to increase transmission of disease.’

72.

Although the evidence clearly shows that masks do more harm than good, we are told that fines for not wearing masks are going up and the military will be brought in if the police cannot cope.

73.

Mask wearing is making shopping unpleasant, and thereby destroying thousands of small businesses. This is one of the changes in society which will lead to the global reset promoted by the United Nations and its Agenda 21 and the World Economic Forum. The plan is to force us to live in sterile cities and to do all our shopping online.

74.

Mask wearing, social distancing and testing will become a permanent part of our world. The end result will be the permanent closure of schools – and the moving of education online. Teachers who insist that pupils wear masks and maintain social distancing rules are destroying their own jobs.

75.

A study entitled, *Optical microscopic study of surface morphology and filtering efficiency of face masks* concluded that face masks made of cloth are not very good at filtering out viruses because the pores are much bigger than the particulate matter that needs to be kept out. One

study showed that face masks may have pores five thousand times larger than virus particles. This means that the virus will wander through the face mask much like a mouse wandering through Marble Arch.

76.

The World Health Organisation recommends that disposable masks should be discarded after one use. Few people can afford to buy two or more disposable masks for every member of their family, and so masks are frequently worn more than once. This massively increases the risk of a chest infection developing. I predict that in a year or two, there is going to be an epidemic of bacterial pneumonia which is going to be blamed on covid-19 or one of the many mutant strains.

77.

Professor Chris Whitty, the UK's Chief Medical Officer, said in March 2020 that wearing a face mask had almost no effect on reducing the risk of contracting covid-19, and that the Government did not advise healthy individuals to wear masks. Instead, he suggested that people should wash their hands for roughly 20 seconds.

78.

Surgical masks are worn to stop respiratory droplets and human debris from the surgeon or nurse from falling into a wound.

79.

Much of the air we breathe in and out goes around the side of the mask unless it is very tight fitting. Loose fitting masks are therefore entirely useless. Tight fitting masks may provide some filtration protection but the tighter a mask is the greater the risk of serious hypoxia and hypercapnia developing.

80.

It is sometimes said that masks should be worn to protect the elderly, the sick and those with serious health problems. It would make far more sense to suggest to such individuals that they protected themselves from society, if they chose to do so. But they should have the choice. And there is absolutely no reason to force younger, healthy members of society to endure lockdowns (which will clearly kill far more people than covid-19), social distancing (which will create massive psychological problems) or to wear masks (which will do no good but which will cause physical and mental health problems).

81.

A paper published by Boris Borovoy, Collen Huber and Q. Makeeta investigated all types of masks and discovered that 'loose particulate was seen on each type of mask'. They also noted that 'tight and loose fibres were seen on each type of mask' and warned that 'if even a small portion of mask fibres is detachable by inspiratory inflow, or if there is debris in mask manufacture or packaging or handling, then there is the possibility of not only entry of foreign material to the airways but also entry to deep lung tissue, and potential pathological

consequences of foreign bodies in the lungs'. The authors draw attention to a correlation between the inhalation of synthetic fibres and various bronchopulmonary diseases such as asthma, alveolitis, chronic bronchitis, bronchiectasis, fibrosis, spontaneous pneumothorax and chronic pneumonia. The authors warn that if widespread masking continues, then the potential for inhaling mask fibres and environmental and biological debris continues on a daily basis for hundreds of millions of people. This should be alarming for physicians and epidemiologists knowledgeable in occupational hazards.' The authors warn that pulmonary fibrosis, a risk of mask wearing, cannot be cured and has a 5 to 20 year survival rate of only 20%.

82.

A mask worn by a child in school was examined in a laboratory. Tests showed 82 bacterial colonies and 4 mould colonies growing on the mask.

83.

'I'm seeing patients that have facial rashes, fungal infections, bacterial infections,' said Dr J. Meehan. 'Reports coming from my colleagues all over the world, are suggesting that the bacterial pneumonias are on the rise. Why might that be? Because untrained members of the public are wearing medical masks, repeatedly in a non-sterile fashion. They're becoming contaminated. They're pulling them off their car seat, off the rear-view mirror, out of their pocket, from their countertop, and they're reapplying a mask that should be worn fresh and sterile every single time.' Dr Meehan also reported an incident where one patient wearing a mask passed out due to low oxygen while at work and fell off a ladder, resulting in serious physical injuries.

84.

If mask wearing were a science, the rules would be constant – but they are not. It is clear, therefore, that there is no science behind mask wearing. Citizens are being forced to wear masks for political reasons.

85.

It is frequently argued that Sweden, which had no lockdown and no mask requirements, has had a very high death rate. If anyone in the media were interested in the facts they would see that the average age of Swedish citizens who died was well over 80, and the great majority of deaths occurred in care homes and nursing homes. The mortality level in Sweden remained below a bad flu season. The Swedish people now seem to have a high, natural immunity. Fact checkers around the world might like to look at the Imperial College projections, which were alarming, and the actual death rate which was not. Other countries which did not make masks compulsory (such as Japan and some African countries) also had relatively low mortality rates.

86.

A study by M. Walker in 2020 (*MedPage Today* 2020 May 20) found that 624 out of 714 people wearing N95 masks left visible gaps when putting on their masks.

87.

N95 respirators (or masks) are made with a 0.3 micron filter. Their name comes from the fact that 95% of particles having a diameter of 0.3 microns are filtered by the mask.

Unfortunately, coronaviruses are approximately 0.125 microns in diameter. Still, these masks will certainly prevent snowballs, flies and other objects getting through.

88.

T. Tunevall wrote a paper called, *Postoperative wound infections and surgical face masks: a controlled study* which was published in the *World Journal Surgery* in 1991. The author reported that the use of masks in surgery was found to slightly increase the incidence of infection over not masking in a study of 3,088 surgeries. The surgeons' masks were found to give no protective effect to the patients.

89.

In the UK, if you don't wear a mask because you have decided you are exempt – and the Government says this is a personal choice – the official advice is that you should not routinely be required to produce any written evidence to justify the fact that you are not wearing a mask. And although I'm no lawyer, I rather doubt that busy bodies, whoever they are, have any right to ask you why you have decided that you are exempt. My website www.vernoncoleman.com includes a link to a section of the Government website which provides an exemption form which can be printed out and attached to a lanyard.

90.

Nine medical authors from Australia and Vietnam studied cloth face masks and concluded that cloth masks should not be recommended for health care workers.

91.

A meta-analysis published in May 2016 concluded that masks did not have any useful effect but that reuse of contaminated masks did transmit infection. Some packs of face masks states that masks do not protect the wearer from the coronavirus.

92.

There is a risk that viruses may accumulate in the fabric of a mask – thereby increasing the amount of the virus being inhaled.

93.

Putting a mask on a baby or an unconscious patient is dangerous. The mask may result in the wearer choking on vomit. In my view, masks on babies could increase the risk of sudden infant death syndrome. No baby should be forced to wear a mask, and yet there are plenty of pictures on the internet showing masks on babies. In some parts of the world, children as young as two are forced to wear masks. Small children are more likely than adults to touch their masks, thereby rendering the masks useless and even more dangerous. Also, small

children are more likely to develop a weakened immune system if they wear a mask. Making children wear masks is a form of child abuse.

‘It is extremely dangerous to cover a baby’s mouth and nose and the design of ‘cute’ baby face coverings that have been brought to our attention look like they would greatly increase the risk of suffocation. I would strongly advise parents not to use any form of face covering for their baby,’ said Dr Rebecca Fletcher, chair of Bury, Rochdale and Oldham Child Death Overview Panel.

94.

Some people claim that face masks give them a sore throat, reports Dr Armando Meza an infectious disease specialist in Texas. ‘Humidity will let bacteria continue to grow inside the mask so if you were growing bacteria in that area and you were breathing that inside, you can potentially get an infection, especially strep or any other bacteria that can cause infection.’

95.

In some countries, quite small children are forced to wear masks on transport and even in schools. The evidence supports the view that politicians, teachers and parents who force (or even allow) children to wear masks are guilty of child abuse.

96.

A mask can substantially reduce blood oxygenation – leading to a possible loss of consciousness. At least one road crash has been blamed on a driver wearing a mask. Police reported that the driver of a single car crash in New Jersey, U.S. is believed to have passed out behind the wheel after wearing a mask for too long. Passengers would be wise to avoid travelling in public service vehicles (buses, coaches, etc.) in which the driver is wearing a mask.

97.

Surgeons and nurses are trained never to touch any part of a mask except for the nose bridge and the ear loops. If any part of a mask is touched accidentally then the mask is discarded and replaced.

98.

Over 2,000 Belgian medical professions have urged that covid-19 be prevented by strengthening natural immunity. Their recommendations include specifically to exercise in fresh air without a mask.

99.

A report by Boris Borovoy, Colleen Huber and Maria Crisler reported: ‘Masks have been shown through overwhelming clinical evidence to have no effect against transmission of viral pathogens. Penetration of cloth masks by viral particles was almost 97% and of surgical masks was 44%. Even bacteria, approximately ten times the volume of coronaviruses, have been poorly impeded by both cloth masks and disposable surgical masks. After 150 minutes of use, more bacteria were emitted through the disposable mask than from the same subject

unmasked. A paper by these authors entitled, *Masks, false safety and real dangers, Part 2: Microbial challenges from masks* is available on the internet and contains a list of 62 scientific journal references showing that masks have no significant preventative impact against any known pathogenic microbes. These authors conclude, ‘Specifically, regarding covid-19, we have shown...that mask use is not correlated with lower death rates nor with lower positive PCR tests.’ The authors add that, ‘Masks have also been demonstrated historically to contribute to increased infections within the respiratory tract’ and they conclude that ‘the use of face masks will contribute to far more morbidity and mortality than has occurred due to covid-19.’

In their following paper entitled, *Masks false safety and real dangers, Part 3: Hypoxia, hypercapnia and physiological effects* they state: ‘In our previous paper in this series, we found a historical correlation with a hypercapnic practice, specifically mask-wearing, and a severe surge of bacterial pneumonia deaths. This time period was mis-named the Spanish Flu, due to a number of reasons, too extensive for this paper. Dr. Anthony Fauci’s research team found that every cadaver exhumed from that time in 1918 – 1919 showed the cause of death was bacterial pneumonia, secondary to typical upper respiratory bacteria.’ They also go on to say: ‘Common and life-threatening diseases of impeded air flow included both obstructive disorders such as asthma, COPD, bronchiectasis and emphysema, as well as restrictive disorders, such as pneumothorax, atelectasis, respiratory distress syndrome and pulmonary fibrosis.’

100.

There is much more evidence supporting the fact that masks should not be worn. Over a dozen scientific papers show clearly that masks are ineffective in preventing the movement of infective organisms and/or reduce oxygen levels, and expose wearers to increased levels of carbon dioxide. Over a dozen studies failed to show that wearing a mask provides protection against infection. In 2011, a meta-analysis of 17 separate studies proved that none of the research showed masks to be useful in preventing influenza infection. The available medical evidence proves overwhelmingly that masks do no good in preventing the spread of infection but do a great deal of harm to those wearing them.

101.

Dr Eric Nepute of St Louis, made a video, which went viral, telling others about what had happened to a four-year-old relative of a patient of his, who nearly died after developing bacterial pneumonia because of prolonged mask use.

102.

At the University of Witten/Herdecke, Germany, an online registry has been set up where parents, doctors, pedagogues and others can enter their observations. On 20.10.2020, 363 doctors were asked to make entries and to make parents and teachers aware of the registry. By 26.10.2020, the registry had been used by 20,353 people. Parents entered data on a total of 25,930 children. The average wearing time of the mask was 270 minutes per day. Impairments caused by wearing the mask were reported by 68% of the parents. These included irritability (60%), headache (53%), difficulty concentrating (50%), less happiness (49%), reluctance to go to school/kindergarten (44%), malaise (42%), impaired learning (38%) and drowsiness or fatigue (37%).

103.

Kester Disability Rights in the UK helped a disabled woman to win the first face mask discrimination case. The woman was refused access to an unnamed service because she was unable to wear a face mask, and as a result of this egregious discrimination, she was paid £7,000 in compensation. The pay-out was achieved through negotiation as there was no dispute that access had been denied, or that the Claimant had a disability exemption.

104.

In February 21, The North Dakota House of Representatives passed a bill that would prohibit state and local governments, schools and businesses from ordering mask mandates. The bill's sponsor, Rep. Jeff Hoverson who described the rules requiring face masks as 'diabolical silliness' also said, 'The mask is a part of a larger apparatus of a movement of unelected, wealthy bureaucrats, who are robbing our freedoms and perpetuating lies.'

105.

Fifteen million face masks provided to pharmacists in Belgium to be distributed free of charge, caused health chiefs some concern when it was discovered that the face masks might contain nanoparticles of silver and titanium dioxide that when inhaled could lead to pneumonia.

106.

In March 21, a 13-year-old boy was banned from attending classes at the British International School, Stockholm in Danderyd, until he agreed to remove the facemask he was wearing. The public Health Agency of Sweden states, 'Children do not need to wear face masks. It is difficult for children to handle and wear face masks the right way, and children are not the drivers (of infection) in this epidemic and do not spread infection in the same way as adults'.

107.

A recent study in the Journal Cancer Discovery found that inhalation of harmful microbes can contribute to advanced stage lung cancer in adults. It is known that long-term use of face-masks may help breed dangerous pathogens. Microbiologists agree that frequent mask wearing creates a perfect, moist environment in which microbes proliferate before entering the lungs. The invading microbes travel down the trachea and the bronchi until they reach the tiny alveoli.

'The lungs were long thought to be sterile, but we now know that oral commensals – microbes normally found in the mouth – frequently enter the lungs due to unconscious aspirations.' – Leopoldo Segal. Study Author and Director of the Lung Microbiome Program and Associate Professor of Medicine at New York University Grossman School of Medicine.

According to the study, after they have invaded the lungs the microbes cause an inflammatory response in proteins known as cytokine IL-17.

'Given the known impact of IL-17 and inflammation on lung cancer. We were interested in determining if the enrichment of oral commensals in the lungs could drive an IL-17-type inflammation and influence lung cancer progression and prognosis,' said Segal.

Whilst analysing lung microbes of 83 untreated adults with lung cancer, the research team discovered that colonies of veillonella, prevotella, and streptococcus bacteria, which may be

cultivated through prolonged mask wearing, are all found in larger quantities in patients with advanced stage lung cancer than in earlier stages.

The presence of these bacterial cultures is also associated with a lower chance of survival and increased tumour growth regardless of the stage.

108.

Each month, it is estimated that 129 billion face masks and 65 billion gloves are used and disposed of globally. A lot of this waste is ending up in landfills, waterways and oceans, which is having a harmful effect on wildlife - particularly sea life. Non-reusable masks, which are made out of plastics such as polypropylene, take around 450 years to biodegrade, making them just as environmentally unfriendly as plastic carrier bags.

109.

According to the UK Government's website (at the time of writing), the following do not need to wear a face covering:

- 1) children under the age of 11 (Public Health England does not recommend face coverings for children under the age of 3 for health and safety reasons)
- 2) people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability
- 3) where putting on, wearing or removing a face covering will cause you severe distress
- 4) if you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate
- 5) to avoid harm or injury, or the risk of harm or injury, to yourself or others – including if it would negatively impact on your ability to exercise or participate in a strenuous activity
- 6) police officers and other emergency workers, given that this may interfere with their ability to serve the public.

110.

The UK Government's website has this to say about exemption cards:

If you have an age, health or disability reason for not wearing a face covering:

- 1) you do not routinely need to show any written evidence of this
- 2) You do not need to show an exemption card

This means that you do not need to seek advice or request a letter from a medical professional about your reason for not wearing a face covering.

However, some people may feel more comfortable showing something that says they do not have to wear a face covering. This could be in the form of an exemption card, badge or even a home-made sign.

Carrying an exemption card or badge is a person choice and is not required by law.

111.

There is a considerable amount of evidence from around the world to show that politicians who have ordered the public to wear face masks have themselves benefitted financially. For example, in the UK the National Audit Office found that companies recommended by MPs, peers and ministers' offices were given priority as the Government sought to obtain Personal Protective Equipment.

Conclusion

At no previous time in history have large numbers of people been forced to wear masks. The long-term physical and psychological consequences are unknown though those ordering that masks be worn are no doubt aware of the extraordinary risks and of the way that masks can be used to oppress and subjugate a population. The evidence clearly shows that mask wearing is likely to do no good but a great deal of harm. The big lie, which the WHO, governments everywhere and YouTube want to disseminate, is that wearing masks is essential to control covid-19. But the medical and scientific evidence (banned by YouTube and most mass media) shows that masks have little or no useful effect but can increase the risk of infection and can make breathing difficult. There is little doubt that masks do far more harm than good. Cloth masks are permeable to 97% of viral particles. A study by the University of East Anglia concluded that wearing masks was of no benefit and could increase infection. Experts in respiratory disease and infection protection from the University of Illinois have explained that face masks have no use in everyday life – neither as self-protection nor to protect other people. A study published in the *Annals of Internal Medicine* concluded that neither fabric masks nor surgical masks can prevent the spread of covid-19 by coughing. An article in the *New England Journal of Medicine*, published in May 2020 concluded that masks offer little or no protection and that the call for masks to be compulsory was an irrational fear reflex. A German study showed that masks had no effect on infection rates. Dr Fauci, the American covid-19 supremo, expressed real doubts about masks. On May 28th 2020, he admitted masks are little more than symbolic. Virtue signalling. A meta study on influenza, published in May 2020 by the CDC in America, found that face masks were of no help. The available evidence shows clearly that masks do not work but do have the potential to cause a variety of health problems – including short-term problems such as breathlessness and long-term problems such as brain damage and death. And yet, despite all this, there have been suggestions from various authorities that mask wearing and social distancing will need to be permanent. It has also been suggested that masks should be worn in the home. The sceptical will find it impossible to avoid the conclusion that there is far more to masks (and compulsory mask wearing) than meets the eye.

Appendix 1

Dr Vernon Coleman attacked the use of masks from the very beginning – describing them as both useless and dangerous. Here (in the order of their release) are the unaltered transcripts of five of the videos which Dr Coleman made explaining the danger of mask wearing:

Mask Wearers are Collaborators Who Could Destroy Us All – They Should Be Locked Up for Helping the Enemy

Dr Vernon Coleman MB ChB DSc FRSA

So now they're turning up the heat. The evil Gates subsidised monsters who are trying to take over the world and turn us all into slavish zombies must be feeling very cocky. In the UK the Government decided that we all have to wear masks in shops. On July 24th the coronavirus is going to mutate, stop being a fairly feeble flu bug and become something as deadly and dangerous as one of the Clintons.

And so on the 24th July we have to start dressing up as bank robbers whenever we go shopping. The shop assistants don't have to wear masks but the shoppers do. Apparently, according to Boris the Buffoon, the coronavirus can't jump to or from a shop assistant but can jump to or from a shopper. How clever the coronavirus is to know this. Of course, if a shop assistant pops into a neighbouring shop they have to put on a mask because then they become a customer and when they are a customer they can catch the virus and spread it.

Another oddity is that although the coronavirus can infect shoppers it can't infect people who work in offices. It seems that this very intelligent virus seems to say to itself 'I can infect these people because they are just out shopping' but 'I must not infect those people in that office because they are working'.

If all this sounds like totally unscientific gibberish that is because it is totally unscientific gibberish.

How clever too for the authorities to know that people in shops must wear masks but not give their names and addresses whereas people in pubs must give their names and addresses but not wear masks.

If we weren't fighting a war against the most evil cabal ever put together in the history of mankind then it would be laughable.

And look at the history behind this latest change of heart.

Professor Jonathan Van-Tam, Deputy Chief Medical Officer previously announced that there was no need to wear a mask.

And Michael Gove, a weedy little British politician who is about as far removed from being a statesman as Bill Gates is from being a doctor, said that the UK Government didn't plan to insist that we all wore masks in shops. I bet he feels an idiot now.

Because within hours Boris Johnson, our Fuhrer, backed up by laws which would have been envied by Stalin, Hitler and Attila the Hun, not to mention Vlad the Impaler and Genghis Khan, suddenly decided, seemingly all by himself, that the entire nation should wear masks whenever they ventured into a shop.

Everyone knows the disease has almost died out. It'll soon be less of a threat than athletes' foot. If the coronavirus were a pop record it would be about to slip out of the Top 100 and slide into oblivion.

So, what had happened to change the pint of rancid pond-water that Boris doubtless refers to as his mind?

Well, the only thing new that I could find was a bit of research performed by a team at Cambridge University. They seem to have concluded that wearing masks was a good thing. And guess what the bloke who did the research does for a living? His name is Richard Stutt and he usually models the spread of crop diseases. Crop diseases! He is another bloody modeller like Ferguson. 'Our analyses support the immediate and universal adoption of facemasks by the public,' Stutt is quoted as saying. And he works on crop diseases and suddenly he knows all about whether or not we should wear face masks. You'd think Boris would be wary of modellers wouldn't you? But then maybe not if they give him the news he wants. My researches suggest that there is going to be a glut of mathematical modellers receiving knighthoods in the New Year's Honours List.

Did Stutt recommend the wearing of masks to stop the flu last year? The mortality risk with the flu is pretty well identical to the risk with covid-19. Has he recommended the wearing of masks to stop the spread of TB? A quarter of the global population is said to be infected with TB, a disease which kills over one and half million a year. If we need one mask for the coronavirus then we need four masks each for TB.

'We have little to lose from the widespread adoption of facemasks,' said a Dr Retkute.

I think the mistake this lot have made has been in focussing on the R number – the number being infected. Bugger the R number. It's of absolutely no real significance. What matters is the D number – the number dying. And the D number has fallen dramatically because they've stopped killing old people in care homes. If Stutt and Retkute were doctors they might understand this better. Why don't they stick to crop diseases?

Nothing to lose by wearing masks?

I know of two people who died because they wore masks and the hypoxia killed them. How's that for nothing to lose?

But then we must remember that it is the Government's plan to help reduce the world population – and thereby win the hearts of Bill and Melinda Gates.

Maybe my scepticism about anything coming out of Cambridge University, where the crop disease bloke works, has been heightened since the University accepted \$210 million from the Bill and Melinda Gates Foundation.

Everywhere you look the Gates Foundation has left its dirty fingerprints.

The bottom line is that I am convinced that there is no sound medical reason to wear a mask. Masks are bad for us physically. And they are bad for us mentally. If you look at the risk benefit ratio then the risks are far greater than the benefit.

The only reason for our being forced to wear masks is to oppress us, to frighten us and to turn us into pathetic slaves of the beast. If you wear a mask they own your body, your mind and your soul. That's it. Game over.

And now that they've made mask wearing compulsory when will they ever reverse the law?

What do you think? In three months' time? Six months? Twelve months?

The correct answer is: probably never.

They've said we'll have to wear masks in shops until the vaccine is ready. And that could be 5, 10 or 15 years. Or Longer. This is going to be part of the new abnormal.

How many people will be killed by masks in the next twelve months alone? Your guess is as good as mine – and almost certainly better than that of any politician.

A friend of mine who suffers from anxiety intends to tell shop keepers that wearing a mask gives her a panic and fainting attack and would they therefore please have someone trained in first aid to follow her around the shop.

Those with respiratory and heart disorders fear that if they don't conform and wear masks they might be subjected to abuse from mask wearing zombies.

The utterly loathsome Hancock, the UK's Minister of Gibberish, says that shop staff should call the police if a customer isn't wearing a mask. If they don't then another busy body customer will probably do the snitching for them. To me it seems as if it's all part of the plan to smash society and create distrust. And, of course, the mask wearing will help destroy shops so that we all do all our shopping online.

Hancock is to me like the appalling Macron in France, living proof of the validity of the Peter Principle – that members of a hierarchy are promoted until they reach the level at which they are no longer competent. Come to think of it that's clearly true of Johnson too.

Shame on the Conservative Party. Let's have a general election and dump these evil bastards onto the political scrap heap. Compared to Boris Johnson the pathetic and utterly woeful Theresa May was a beacon of strength, probity and wisdom. I can't believe I said that but it does show the level of contempt I have for Johnson. It is now clear that the buffoon act wasn't an act. He is a buffoon – clearly as under-endowed in the brain department as you can imagine. Incidentally, the psychologists advising the Government obviously think that the term 'face covering', the new preferred term, is somehow more acceptable than the word 'mask'. Or maybe their contempt for us is so complete that they think we won't notice that there is something of a similarity between an item called a face mask, which covers the lower half of the face, and something quite different called a face covering which covers the lower half of the face.

Boris, you crooked, ignorant, deceitful, two-faced, cheating, betraying bastard, we would know they were masks if the psy-op specialists suggested you call them lemon meringue pies.

Alternatively, is it impossible that masks are part of some satanic ritual – along with the constant hand washing, the social distancing and the house arrests?

When we have got through this war, and won the conflict against our own government, we will never forget Boris Johnson's perfidy – or his government's total betrayal of the voters. Johnson will join Blair as a candidate for the War Crimes Tribunal.

The terrible thing is that many people have already fallen for the nonsense.

The other day I drove to a local supermarket. I spotted just a few wearing masks, from their eyes half of them looked arrogant and very pleased with themselves – as though they had just been given a gold star or appointed milk monitor for the term. The other mask wearers looked terrified as though they were expecting to be dead before they reached the safety of the checkout.

Outside the supermarket I saw several people wearing masks. A young couple with a four or five-year-old – all wearing masks. A pair of teenagers wearing masks. A few middle aged folk masked up and a couple of old ladies in masks they'd obviously made themselves. Oddly enough I didn't see any elderly men wearing masks. Dunno why.

The town looked so sad, by the way. Apart from the supermarket the only shops open were two nail parlours (both empty), an ironmonger (I was the only customer there) and a charity shop. Everything else was closed. Probably permanently.

It is clearly not being unfair to say that the mask wearers are not God's brightest creations.

However, the really sad thing is that the mask wearing zombies are too stupid or too ill-informed to realise that they are playing into the enemy's hands.

Some of the zombies actually think they're helping to save lives. If you try to tell them about the dangers of mask wearing, they will point out that surgeons wear masks in the operating theatre. As though this had any relevance. What they don't realise is that surgeons wear masks to stop bits of saliva ending up in the wound. They don't wear them to prevent the flow of disease, they don't usually wear them all day long, they don't wear them outside

the operating theatre and they certainly don't wear them while walking about and requiring extra oxygen.

How can there be people who don't realise that in wearing masks they are aiding and abetting the thieving criminals who are stealing our freedom and our future.

Anyone who wears a mask is a spineless and moronic collaborator helping the worst people this world has ever seen.

Independent research by a bunch of florists has shown that mask wearers aren't capable of thinking for themselves; they are not very bright, they are followers, the sort of people who, as children, dreamt of being concentration camp guards. They never do anything or achieve anything; they are saddos, nerds and remainers – invariably devoted to the European Union.

Put on a mask and you are bending a knee before Gates, Soros, the Rothschilds and the Rockefellers, Blair and the Clintons.

What an evil, soulless bunch.

I've recorded two videos about Gates. Please watch them if you haven't. The first video is called Just A Little Prick part one. And, with startling originality that I am very proud of, the second one is called Just A Little Prick part two.

The mass media invariably describe Bill Gates as a philanthropist. The BBC and *The Guardian*, both sharing some of the Gates wealth, probably think he should be known as St Bill.

However, I am going to try to get the Oxford Dictionary to revise its definition of the word philanthropist.

It should read: 'A philanthropist is an evil crook who has absolutely no interest in the welfare of others but who uses large donations of money to buy power and control and to make even more money'.

I'll suggest that synonyms of philanthropist should include: 'slimy, single cell organism usually found at the bottom of filthy ponds'.

Just remember that next time you see anyone describing themselves, or being described as a philanthropist.

The idiots wandering around in their little masks are bending the knee to the toxic Gates; in my view a being so dangerous and diseased that he should be rammed into a test tube and kept in Madam Tussauds chamber of horrors. Mothers could take their children and point him out as the definition of evil.

And they are bending a knee to more candidates for the chamber of horrors: Blair, the hideous Clintons, the foul Obama and the rest of the malignant crew.

Oh and the wretched Boris Johnson too.

The mindless mask wearers are collaborators and when war ends you know what happens to collaborators. Most of them are political innocents who voted Remain because they didn't bother to do enough research to know that the EU had been set up by Nazis to enable post-war Germany to control Europe.

Finally, I'll leave you with my new mantra:

No silly mask

No deadly vaccine

No social distancing

Please learn it, recite it and share it with the collaborators who seem determined to drag us down with them – but who will fail because those of you who have seen the light have a monopoly on wisdom, courage and integrity.

And two other small things.

First, the channel is growing so fast that YouTube doesn't always seem to manage to send out notifications about new videos. I'm sure this is just a technical hitch. We try to research,

write, edit, record and put out a new one each day at 7.00 pm – though this doesn't leave much time for sleeping and eating and virtually none for dealing with emails.

Second, as you know, we don't accept ads or sponsors or any money for the channel or the website and I promise that we never will. However big the channel gets, or the website gets, there will never be any outside money involved. Unlike the BBC, for example, which sold out years ago and cannot be trusted to tell the time, this is a genuine non-commercial public service channel. We specialise in the truth, served with a little spice I hope, and leave bias, prejudice and fake news to the vastly overpaid cretins at the BBC.

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Most Mask Wearers will be Dead or Demented in Ten Years

Dr Vernon Coleman

The deadly dangers of the toxic, experimental 'vaccines' are rightly getting a good deal of attention. But the danger of mask wearing has been largely forgotten.

This is a huge mistake.

If the vaccine doesn't kill the zombies then the chances are that the masks will do the job very effectively.

Amazingly, no long-term trials have been performed to show the effectiveness or the safety of wearing a face mask.

And so mask wearing is, like the experimental covid-19 jabs, a massive experiment. Despite this, the signs are that mask wearing, like social distancing, testing and tracing, open windows, lockdowns, border controls and hand sanitisers, is likely to be permanent. Indeed, I've said since the start that it would be. The masks, of course, have nothing to do with infection – they are about control – compliance.

So it's no surprise to hear government advisors warning, time and time again, that masks are here to stay. Permanently.

Just the other day someone called Susan Michie said that masks – and everything else – should be permanent 'to boost public health'. Like most of those pontificating about these things she's not a medical doctor, of course. She's a psychologist and an expert on 'behavioural compliance'. And that tells us all we need to know.

Michie allegedly compared wearing a mask to wearing a seat belt in a car and I rather think that's the most stupid thing I've heard since Devi Sridhar opened her big mouth and used the BBC to tell children everywhere that the vaccine is 100% safe. Seat belts are all upside and no downside. Masks are all downside and no upside.

The unforgiveable Sridhar should have known, by the way, that no pharmaceutical product has ever been made that is 100% safe. And there must have been someone at the BBC who knew the phone number of a doctor they could ring to check that out.

For well over a year I have been studying the science behind mask wearing and it's truly scary. Long-term mask wearing is deadly and that medical doctors don't recommend it.

Michie and her co-conspirators should read my book *Proof that masks do more harm than good* – it's packed with scientific evidence showing that masks are massively dangerous but entirely useless.

My professional judgement, based on an extensive study of all the available evidence, is that those who wear a mask every day will, if they survive the experimental jab for ten years, be dead or demented as a result of their mask wearing. Not all surgeons wear masks by the

way, and even if they do they change them every two hours and work in a climate controlled environment.

And I believe that as a medical doctor with decades of experience at assessing clinical trials, adverse events and risk benefit procedures my independent, unbiased judgement is better than that of government advisors and journalists anywhere in the world – who are, in my view, like Michie, merely parroting politically approved nonsense. My track record at investigating medical hazards is second to none. On www.vernoncoleman.com there's a list of some of the warnings I've given and predictions I've made over the last half a century.

The truth is that the whole mask wearing exercise has been part of a scare mongering campaign which has been organised to terrify people so that they put up with living in a fascist society and accepting toxic, experimental jabs as their route to freedom.

I'm not alone in regarding mask wearing as a dangerous and useless activity.

When the covid-19 hoax began, authorities around the world announced that mask wearing was pointless and it was widely agreed by experts that they could probably do more harm than good.

The World Health Organisation supported this general view which was in accordance with just about all the available scientific evidence. Medical advisors around the world agreed that there was no need to wear masks.

In March 2020, Professor Whitty, the UK's Chief Medical Officer said that wearing a face mask had almost no effect on reducing the risk of contracting covid-19. He said that the UK Government did not advise healthy individuals to wear masks.

Also in 2020 a White House coronavirus advisor, claimed that face coverings are not effective in stopping the spread of the coronavirus. His tweet on the subject was removed by Twitter.

Later during the year the story changed.

Although there did not seem to be any scientific evidence supporting such a dramatic change the World Health Organisation suddenly supported face mask wearing and almost instantly governments around the world changed their views overnight and decided that we should all wear masks.

No one has ever explained this change of heart. The medical and scientific evidence certainly does not support this change of heart. I can only assume that the change was made for political purposes.

At no previous time in history have large numbers of people been forced to wear masks. The long-term physical and psychological consequences are unknown though those ordering that masks be worn should be aware of the extraordinary risks and of the way that masks can be used to oppress and subjugate a population.

The big lie, which the WHO and governments everywhere want to disseminate, is that wearing masks is essential to control covid-19.

Really?

A study by the University of East Anglia concluded that wearing masks was of no benefit and could increase infection. Experts in respiratory disease and infection protection from the University of Illinois have explained that face masks have no use in everyday life – neither as self-protection nor to protect other people. A study published in the *Annals of Internal Medicine* concluded that neither fabric masks nor surgical masks can prevent the spread of covid-19 by coughing. An article in the *New England Journal of Medicine* concluded that masks offer little or no protection and that the call for masks to be compulsory was an irrational fear reflex. A German study showed that masks had no effect on infection rates. In 2020, Dr Fauci, the American covid-19 supremo, expressed real doubts about masks. On May 28th 2020 he admitted masks are little more than symbolic. Virtue signalling. A meta study on influenza, published by the CDC in America, found that face masks were of no help.

The available evidence shows clearly that masks do not work but do have the potential to cause a variety of health problems – including short-term problems such as breathlessness and long-term problems such as bacterial pneumonia, brain damage and death. And yet, despite all this, there have been suggestions from various authorities that mask wearing and social distancing will need to be permanent. It has also been suggested that masks should be worn in the home and out of doors. The sceptical will find it impossible to avoid the conclusion that there is far more to masks (and compulsory mask wearing) than meets the eye.

The bottom line is that there is absolutely no scientific reason for mask wearing under any circumstances. The covid-19 hoax is an IQ test. Anyone who wears a mask after studying the evidence has clearly failed the test.

My estimate is that mask wearers are losing five to ten IQ points every year that they wear their masks. Anyone who wears a mask for more than two hours without changing it is at risk of serious infection. Wearing a mask for hours at a time results in increased levels of carbon dioxide in the blood and dangerously lowered blood oxygen levels. Those who are stupid enough to wear two masks at a time are unlikely to last ten years.

Anyone who says that masks are safe and helping to stop the spread of infection is stupid or lying. Anyone forcing children to wear masks should be imprisoned for child abuse.

Remember, long-term mask wearing is experimental. It has never been proved to be safe or useful. But short-term mask wearing has been proved to be dangerous.

Remember that Kester Disability Rights in the UK helped a disabled woman to win the first face mask discrimination case. The woman was refused access to an unnamed something or other because she was unable to wear a face mask, and as a result of this egregious discrimination, she was paid £7,000 in compensation.

Remember there are no controls about the manufacture of safe masks – or about what impurities or bugs they may contain. I saw one hospital which had a huge box of face masks for visitors to wear. The masks were unwrapped and could have all been coughed on by someone with tuberculosis.

Remember that a recent published study found that inhalation of harmful microbes can contribute to advanced stage lung cancer in adults. It is known that long-term use of face-masks may help breed dangerous pathogens and that frequent mask wearing creates a perfect, moist environment in which microbes proliferate before entering the lungs. The invading microbes travel down the trachea and the bronchi until they reach the tiny alveoli. The presence of these bacterial cultures is also associated with a lower chance of survival and increased tumour growth regardless of the stage.

Remember that it is estimated that 129 billion face masks and 65 billion gloves are used and disposed of globally each month. A lot of this waste is ending up in landfills, waterways and oceans, which is having a harmful effect on wildlife – particularly sea life. Non-reusable masks, which are made out of plastics such as polypropylene, take around 450 years to biodegrade, making them just as environmentally unfriendly as plastic carrier bags.

Remember, there is a considerable amount of evidence from around the world to show that politicians who have ordered the public to wear face masks have themselves benefitted financially. For example, in the UK, the National Audit Office found that companies recommended by MPs, peers and ministers' offices were given priority as the Government sought to obtain Personal Protective Equipment.

Finally, and crucially, according to the UK Government's website (at the time of writing), you do not need to wear a face covering:

- 1) if you are under the age of 11
- 2) if you cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability

- 3) if putting on, wearing or removing a face covering will cause you severe distress
- 4) if you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate
- 5) if you wish to avoid harm or injury, or the risk of harm or injury, to yourself or others – including if wearing a mask would negatively impact on your ability to exercise or participate in a strenuous activity
- 6) if you are a police officer or emergency worker and that a mask may interfere with your ability to serve the public.

And the UK Government's website adds that if you have an age, health or disability reason for not wearing a face covering, you do not routinely need to show any written evidence of this and you do not need to show an exemption card. You do not need to seek advice or request a letter from a medical professional about your reason for not wearing a face covering.

If you want to avoid idiotic confrontations and want to show something that says you do not have to wear a face covering you can have an exemption card, badge or even a home-made sign.

But carrying an exemption card or badge is your choice and is not required by law. And no one is entitled to ask you for a badge or anything else – or to ask you why you aren't wearing a mask any more than they're entitled to ask if you are wearing clean underwear.

The Government says you can tell them to piss off if they do. Well, it doesn't actually say that. But you can ignore them. The Home Office details are on my websites.

Remember that in the UK, at least you don't have to wear a face mask if you find doing so uncomfortable or distressing in any way. And you don't have to wear a lanyard any more than you have to sew a yellow star onto your clothing.

I repeat, in the UK, no one, not even a police officer, has the right to ask you to wear a mask or to ask you why you aren't wearing a mask.

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The Lockdowns, the Masks, the Rules are Coming Back: the Noose is Tightening

Dr Vernon Coleman

This is the calm before the storm.

Government advisors such as Ferguson, one of the individuals who ignored their Government's rules, are saying that the worst is over. Ferguson has been quoted as saying that the so-called pandemic will be over by October. Other advisors and experts say it's going to get worse before it gets even worse than worse. The so-called experts at Imperial College, London, where Ferguson plays with his abacus, warned Johnson that more than 115,800 people would die in a year if lockdown restrictions were lifted. I love the precision of the forecast. More than 115,800 will die. Not more than 115,700 or 115,900 you note. I could make up stuff like that all day long and so could you. Imperial College has the sort of forecasting record that would embarrass a racecourse tipster with the DTs but they still have the gall to claim they can be precise in their forecasts. These people are like the Met Office

who tell us what the weather is going to be like in a generation's time but who can't tell us what the weather was like yesterday.

And the Academy of Medical Colleges says that the NHS is under unprecedented pressure and that covid-19 will get worse.

For a day or two the problems are threatening only in countries far away.

For example, consider North Korea.

North Korean leader Kim Jong-un is widely regarded as being a dangerous lunatic. People who take pop tunes into North Korea are executed. Anyone who listens to them gets 15 years in a slave camp.

But things look as if they are about to get even worse for the North Koreans.

There is talk that citizens there are going to be put under house arrest, and forced to stay in their own homes, and it is rumoured that perfectly healthy citizens in North Korea may be forced to wear face masks for no good reason at all. There are even suggestions that relatives may be banned from hugging one another. As if any world leader would do that! As far as I know there is not yet any talk of forcing healthy citizens to submit to a dangerous, experimental injection that even governments admit is killing or maiming hundreds of thousands.

Clearly, only a madman would introduce such oppressive and pointless laws.

Here in the UK, the nation's first totalitarian Government promised faithfully that the experimental covid-19 jabs would not be mandatory and that there would be no discrimination between the jabbed and the unjabbed.

But as it has become steadily clearer that the covid-19 jabs are probably the most useless and dangerous man-made products in history, so the rules have changed and it has become steadily clearer that the politicians who made these promises were lying. Gosh, what a surprise.

A British politician called Gove says that people who won't be vaccinated are selfish and, even more absurd, someone called Therese Coffey, who is apparently a cabinet minister, says that people who don't take the jab are scared. That goes alongside the Queen's mindlessly reassuring comment that it doesn't hurt.

No, it doesn't hurt until ten minutes later when you lose all control of your limbs or fall down dead with a heart attack.

Boris Johnson, the worst Prime Minister since paper waving Chamberlain, has urged the use of vaccine passports – a useful replacement for the ID cards we all rejected.

And the good news for the injected, with their special little passports, is that they can now go to the airport, wait six hours to be processed and then travel to El Salvador, Gabon, Guadapole, South Sudan or Kosovo on holiday. Of course they may not be able to come back without a lengthy stay in a grotty airport hotel at both ends but let's not be gloomy. This is obviously a great breakthrough for those dreaming of an exciting two week stay on top of the Accursed Mountains in the centre of the Balkans. Few people know that Kosovo has had five presidents since the 4th April 2021 so that will be a good talking point on eventually returning home. The injected deserve this perk because once pathogenic priming gets going many of them will be dead or moribund before Christmas.

They'll try anything won't they – rather than admit that the experimental covid-19 jabs are the most toxic medical creation since arsenic was used as a remedy for stomach problems. In recent years, in the US and the UK, vaccines have killed far more people than terrorists – including 9/11. The fact checkers can spend all week checking that out. I'm right.

Allowing the experimentally vaccinated special privileges is absurd. (There is even a plan to give the jabbed £100 to spend.) It is possible that those who've been jabbed are dangerous to themselves and to others (no one knows). And the jab, as we know, may not stop people

getting or spreading anything. The CDC in America says fully vaccinated people spread the delta variant and should wear masks.

With all the facts available you'd have to be a BBC employee or mentally deficient in some way – perhaps through wearing a mask for too long and suffering the inevitable dementia – to believe that we are in the middle of a pandemic.

The only pandemic is a pandemic of coincidences as the covid-19 experimental jab causes more and more deaths and serious injuries and politicians, their pet dog advisors and tame media doctors insist that there have been thousands of coincidences in the last few months. We can see now why Bill Gates told governments to give indemnity to the drug companies. Without indemnity the courts would be clogged with lawsuits brought by injured and bereaved jab victims and the doctors who've been jabbing away for money would be behind bars.

In previous videos I have shown beyond any doubt that the UK Government's own figures prove that covid-19 is no more deadly than the annual flu.

Everything the politicians, the advisors and the mainstream media tell us is a lie. And now we know what all those Bilderberger meetings were about. They really were plotting the end of the world. And MPs do what they're told to do. Parliament is dominated by cowards, cretins and cryptorchid buffoons, none of whom has an IQ higher than their body temperature and who'd vote for anyone who offered them a free bag of sweets and a bottle of pop. The politicians ignore their own rules because they know none of it is real.

And now they're tightening the noose and trying to finish us off.

The UK Government has murdered most of the care home residents so now they are going to kill the staff by forcing them to take an experimental jab that has never been proved to stop folk catching or transmitting covid but which has been proved to kill or injure the perfectly healthy. Mind you, there is a loophole. The staff don't have to be jabbed if they are medically exempt. Loads of people can't have the jab because they had an anaphylactic shock in the past – and in many cases those incidents aren't recorded on their medical records. It's important to think back and see if you might have had a serious reaction to a vaccination in the past.

The vulnerable and the elderly have been instructed not to mix with other people – presumably so that no one will notice when they're killed off by the jab. The lonely must remain lonely in our new wonderful, Schwab designed world.

It is an inconvenient fact that the UK leads the way in covid-19 jabs and now has more new daily covid cases than the entire EU.

In India those who aren't jabbed have to wear humiliating signs round their necks. Pubs in the UK are told that to increase the vaccine uptake among the young it should be compulsory to demand certificates in bars, restaurants and clubs.

Joe Biden's White House is asking phone companies to monitor private text messages to look for what they call vaccine misinformation but what rational people would call vaccine truths. Why anyone should be surprised at this is a puzzle. They've been listening to phone calls and reading emails for longer than Tony Blair's been a war criminal. They just listen out for tell-tale words and phrases which tell them that you're a threat. Use a word with a vowel in it and they'll mark you down as a threat to the New World Order. Key words they regard as a threat are peace, freedom, honesty and ivermectin though most of the spies at GCHQ in the UK think 'Ivor Mectin' is a Welsh renegade living in a caravan in Aberystwyth

In Ireland a 66-year-old grandmother – the very sort of person governments claim to be trying to save but in practice the sort they've murdering in cold blood – was jailed for 90 days for having the good sense not to wear a face mask. She presumably knows that the evidence proves that wearing a mask does more harm than good. Incidentally, no one who doesn't want cancer or who has cancer or who has had it should never, ever wear a mask. Masks

result in hypoxia – low blood oxygen – and that encourages cancer cells to grow or to spread. Mask wearers will be more likely to develop cancer and if they've ever had it more likely to suffer metastases.

The other day the *Daily Mirror* claimed that we in Britain have much to be proud of. Our history, our courage and our respect for our elders. Oh yes? Well we're destroying our history, most of the nation are cowards and will stick their heads in a bucket of porridge if told to do so by a TV doctor, and our government is killing off the elderly as fast as it can.

Malta won't accept tourists who haven't been jabbed and who haven't shot at least two million migrating song birds. (What the Maltese do to songbirds is sickening beyond belief. When I first exposed this many years ago I received a serious death threat which was investigated by Interpol for ages. Heathrow is alleged to be fast tracking the vaccinated in preference to the intelligent, and publicans who want to close permanently are apparently introducing vaccine passport requirements in a sort of mad, commercial suicide. The official line is that this should be done to increase the vaccine uptake among the young who might not otherwise die soon enough.

The British Medical Journal published a paper about mandatory experimental jabs for care home workers. The authors promise that 'vaccination protects individuals from covid-19 and reduces the risk of transmission of disease to others' – a promise which surprised me because even the NHS, the great betrayer, is cautious about making such a claim. The BMJ article references that quote with a paper which begins with the words 'This article has not been peer reviewed. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.' The word not is emphasised. The pro-pandemic loonies always sneer at any paper which hasn't been peer reviewed but when it's convenient, well, whatever floats your sinking boat. Not yet peer reviewed research, which has not yet been done, will surely show that 97% of those wearing masks and being jabbed are virtue signalling, bed-wetting numpties. Talking of which, Chris Whitty, the heartthrob of the mask manufacturers, and Patrick Vallance, the GSK's best known and most well-situated former drug company executive and big-time private shareholder, both say that they will continue to wear face coverings. They say that they will wear them as a common courtesy if someone is uncomfortable. Well, I find that seeing face masks makes me uncomfortable so I hope Whitty and Vallance will remove their masks if we are unlucky enough to bump into one another in the street.

The BMA, the trade union and the patients' enemy, is calling for face masks to stay and for new ventilation standards to continue – doors and windows open whatever the weather. Local mayors and transport chiefs are talking of making masks compulsory and there is no talk of exemptions, so many travellers will be worse off than they were when masks were enforced under the law. Union leaders, who have all become world experts on things about which they know as much as I know about synchronised swimming, warn that workers will be at risk if face masks are dropped. And the government in the UK wants a longer school day so that children will have to wear their masks for seven or eight hours at a time and become demented slightly sooner.

It is worth remembering by the way that in March 2020 the BMJ published a letter pointing out that flu shots could have contributed to the covid-19 outbreak. The author reports that a randomised placebo controlled trial in children showed that flu shots increased five-fold the risk of acute respiratory infections caused by a group of viruses including coronaviruses. The argument was that flu vaccines might alter our immune systems to increase susceptibility to other infections. Before the so-called fact checkers get excited, they should look at the letter which was published in the BMJ way back on 28th February 2020. I haven't seen that news on the BBC but I hear from an insider that their staff have been taking

a good deal of time off work because they are all attending reading and writing classes, which is nice.

The FDA has warned that the Johnson and Johnson jab is linked to autoimmune disease but no one with a Government pension gives a damn. How many times do we have to share the truth before someone listens? Where are all the lawyers when you need one? What about some pro bono litigation?

Meanwhile, as the number of people dying on waiting lists soars into the many millions, doctors and the NHS glows in the receipt of the George Cross, so doctors and nurses now make it clear where their loyalty lies. Consultants are threatening industrial action because they want more money. At least their industrial action is not about pensions this time. The Royal College of Nursing is considering a strike ballot as nurses demand a pay rise of 12.5%. All this will push up waiting lists to the point where anyone needing life-saving surgery will be lucky to be seen before the next millennium is under way.

And in hospitals all over the country, elective operations are being cancelled, partly to help boost the waiting lists and partly because having patients in hospitals is a bloody nuisance which really has to stop.

Public Health England says that 62% of alleged covid deaths now occur among people who have been jabbed, which should comfort those who haven't bared an arm, and thousands of people are deleting the NHS covid app though why they put it on in the first place is a mystery. An official guide is now available telling everyone how to tell the difference between hay fever and covid – which tells us all we want to know about this deadly disease. Now all we need is an app to help us tell the difference between the covid-19 jab and an infusion of neat paraquat.

Delighted by the murderous success of the covid-19 jab, we learn that the new flu vaccine for the autumn will be another mRNA toxin – which will be given in one arm while the 3rd covid jab goes into the other arm. The two will meet in the middle and what happens next is anybody's guess. That's not a figure of speech. It's fact. If they give children an attenuated nasal flu vaccine some of the attenuated bugs will survive, spread and cause absolute mayhem – especially among the injected and witless.

An expert in the US says that there is now no doubt that vaccinated people are helping to spread the Delta variant and a new analysis from a number of British universities has shown that children are at very little risk of becoming severely ill or dying as a result of covid-19 and that most of those dying of covid had underlying health conditions. The authors of both reports should expect their Wikipedia pages to describe them as former war criminals before the week is out.

Myocarditis is now said to be caused by covid-19 but they only decided that after it became abundantly clear that myocarditis is definitely caused by the covid-19 jab and this was decreed damned inconvenient. Suddenly claiming, without bothering to produce any evidence, that myocarditis is caused by covid-19 is another flimsy piece of pseudoscience being used to confuse and frighten a bewildered public and to cover up and distract from the inconvenient truth. I expect the BBC Panorama programme will devote a whole hour to this before the month is out. Who the hell needs evidence when there are so many Bill Gates sponsored academics wandering around looking for TV cameras?

They're going to loosen the lockdown and increase the PCR cycles (which are already at 45 cycles of amplification which is high enough to get a positive result from a piece of concrete) and within weeks they'll be able to tell us that the disease is taking hold again. And, as I predicted months ago, they'll say the flu is coming back. They'll say it's our fault that they have to introduce tough new laws for the autumn. As I've been predicting for months they'll blame those sensible enough to have refused to be jabbed. Mandatory masks, mandatory jabs, mandatory business closures, mandatory social distancing, a ban on all

protests and demonstrations. That's what we can expect. And they'll keep all those silly arrows painted on the floor in supermarkets. I actually think those arrows are racist in that they are offensive to Native North American Indians.

So, what does all this tell us?

It tells us that the lies are going to keep coming and the truths are going to be suppressed ever harder. And we have to fight harder than ever. We're all tired but we have to keep sharing the truth wherever we can. Print out articles from vernoncoleman.org and share them. Send copies of the constantly updated article about vaccine deaths and injuries to MPs, doctors, teachers, police officers, journalists and lawyers.

Don't be fooled by the calm before the storm.

To mix a couple of metaphors, we're in the eye of a hurricane and the noose is tightening.

We have to fight harder because we have to win.

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Masks Cause Cancer

Dr Vernon Coleman

A woman was getting on a bus. Suddenly, she stopped. 'I've forgotten my mask,' she said.

'You can't come on without a mask,' said the driver officiously.

A woman who was leaving the bus removed her mask and offered it to the stranger. 'Here you are,' she said, 'have mine'.

And although I still find it difficult to believe this, the maskless woman accepted the gift and put it on – offering her thanks as she wrapped the dirty, used mask around her face.

It's madness, of course.

Britons are currently getting through 3 billion face masks a month. If people changed their masks as regularly as they should then the figure would be much higher.

Even when the rules about wearing masks were softened many people continued to wear them – encouraged by politicians and others insisting that masks should be worn in some public places. The supermarkets and other establishments I've visited since so-called Freedom Day have been as full as ever of mask wearers. Very few shops have staff who are brave enough to show their faces. I would estimate that at least a third wear masks outdoors and ninety per cent wear them in shops and so on.

Commentators in the mainstream media invariably stick to the official line – that masks are valuable – and they rarely if ever even mention the clear and present dangers of covering your mouth and nose.

And there is one hazard associated with mask wearing which has been totally ignored by the mainstream media: cancer.

We know, without a shadow of doubt, that mask wearing results in low blood oxygen levels – hypoxia.

Experiments have been done proving this to be true.

And we also know that cancer thrives in a low oxygen environment.

And so the inescapable conclusion is that people who wear masks – particularly those who wear them for hours at a time – will be more likely to develop cancer.

Moreover, individuals who have had cancer are more likely to suffer from metastases – a spread of their disease – if they wear a mask.

This isn't a theory or a suggestion – it's an unarguable fact. Just check it out if you don't believe me. Just type 'cancer and oxygen levels' into a search engine.

And then show the results to anyone you know who insists that wearing a mask is sensible. It is clear that mask wearing isn't just part of the training programme – it's also part of the culling process. Drug companies will benefit, of course, as the demand for chemotherapy drugs rises.

UK Government advice is that individuals don't have to wear a mask if doing so would endanger or damage their health. The precise wording is that you don't need to wear a face covering if you wish to avoid harm or injury.

So that's pretty clear.

If you want to reduce your cancer risk then you should think hard before wearing a mask.

Finally, here's another reason that masks are harmful.

Babies need to see human faces as part of their development. It isn't good for them to see masked faces all day long. Anyone who wears a mask is being cruel to babies.

Here's a slogan for you to put on a T-shirt: 'Babies need smiles – take off your mask'.

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Mask Wearing is Destroying the Development of Babies

Dr Vernon Coleman

Right from the start of the massive covid fraud it was patently clear that masks were unnecessary and were, indeed, certain to do far more harm than good.

Indeed, back in the spring of 2020, government advisors around the world all agreed that masks weren't necessary and were, indeed, nothing more than virtue signalling. And then, without good reason, they suddenly changed their minds.

Back in July 2020, I made a video entitled 'Mask Wearers are Collaborators who could destroy us all'. I put it on something called YouTube who removed it after 127,000 people had watched it. The transcript can be seen on www.vernoncoleman.com

Up until recently I was mostly concerned with the effect of masks on physical health. There is no doubt that masks increase the risk of pneumonia and patients who have had cancer are more likely to develop metastases if they wear a mask regularly. The hypoxia induced by wearing a mask makes cancer more likely. Naturally, several thousand fact checker organisations throughout the world – 97% of them probably receiving funds from drug companies, governments and the Bill and Melinda Gates purse – all agree that masks will protect you from flu, bankruptcy, impotence, ear wax and unsightly hair. But fact checkers are, of course, invariably lying through their gold plated teeth and can merrily be ignored by those of us genuinely concerned with facts and checking them.

But it is not just adult health which is adversely affected by masks. There is now clear evidence that lockdowns, masks and other absurd regulations have resulted in babies and infants having significantly reduced verbal, motor and overall cognitive performance compared to children born before the fraud. Unborn children are susceptible to genetic and environmental factors which can lead to life-long changes in brain development.

Those absurd TV pictures of actors allegedly dropping dead on the streets of Wuhan in China helped to create fear in pregnant women and, therefore, in their unborn babies. Governments have for eighteen months been deliberately creating fear: fear of dying, fear of poverty, fear of homelessness, fear of infecting and killing granny, fear of breaking the law.

As a result there has been a massive rise in depression and anxiety. This is especially potent and destructive when it affects women carrying babies. Among pregnant women a third show clinical depression while nearly half show real symptoms of anxiety.

These days, when babies are born in hospitals, mothers have to cover their faces as soon as they have given birth and in some countries wear masks while they are giving birth. This is wicked, and those responsible are truly evil and ignorant.

When their mother wears a mask, newborn babies don't see the reassuring, loving, comforting smile of their mother – instead they see a masked face: a blurred image which is frightening and not reassuring.

A paper in the Journal of Neonatal Nursing entitled 'The Implications of face masks for babies and families during the covid-19 pandemic' makes scary reading.

A baby's brain grows rapidly and gets to half its adult size in three months. By the age of 3 years an infant's brain is 80% of adult size. Moreover, it is known that brain growth in infants is much affected by the baby's relationship with the people it sees.

Way back in the 19th century, Charles Darwin said that the ability to read facial expressions has an evolutionary advantage in helping to aid social interactions, reduce misunderstandings and regulate behaviour. Looking at faces helps us to gauge emotions.

We know that babies learn in days to identify their mother's face and to differentiate between different facial expressions – whether the people they see around them are happy, sad, surprised or whatever.

Face masks stop this.

Masks stop bonding and attachment between a baby and its parents. Masks stop emotional development. Masks stop intelligence developing. And masks stop a baby's brain growth.

Masks muffle speech (incidentally 5% of people – including children – rely on reading lips and facial expressions so masks make life very difficult for them). Masks stop communications. Masks stop us feeling safe. Only truly evil people would force mask wearing upon whole populations.

The authorities know damned well that masks do more harm than good.

Just look at what Whitty and Fauci said in the spring of 2020 when they were following the research and the evidence – and masks were described as useless virtue signalling.

Government advisory teams are packed with psychologists and brain washing specialists. They know that masks are destroying us all in many different ways. They know, just as well as I do, that masks do more harm than good. And they know that masks are having an irreversible and potent effect on the development of babies.

As I have said before a great slogan for a T-shirt would be Babies need smiles. Take off your mask.

We need to make more people realise that wearing masks is harming the development of babies and infants. The people who wear masks because they are absolutely terrified that there is a plague-like virus out there are lost. The people we need to reach are the sanctimonious, virtue signalling mask wearers. Their selfishness is permanently damaging the development of babies and infants.

And do you know what is really terrible?

Governments, medical advisors and the medical establishment all know this.

And they don't care because they know those babies are, in due course, going to be jabbed and killed.

It's all part of the Great Reset. The New World Order. The greatest crime in the history of mankind.

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Chronic Maskitis – a scary new disease

It's February 2022, this is video number 307.

It's a sad but safe bet that you know at least one person who still wears a mask when they go outside, enter a shop or board a bus or a train. You probably know more than one.

I went into a department store the other day and every member of staff had a mask on. All of them. I was told they wore them because customers preferred it. In truth they are pandering to the whims of the cowardly, the gullible, the clinically insane and the contemptible collaborators. In the shops I've visited in the last few days 90% wore masks.

The UK Government has admitted that there is no evidence that masks stop any bugs spreading. And the fact is that anyone who has ever worn a mask because they thought it would keep them safe from covid was misled, lied to, falsely reassured and behaving irrationally. Many people in power continue to insist that people wear them and they do this to remind people that nothing is normal –nor ever will be.

We have entered the Great Reset and masks are there to remind us of our slavery. The greens don't seem to care that more plastic is used to make the billions of masks than the plastic bags they hated so much. They don't care about the birds and other wildlife being harmed by discarded masks.

Moreover, anyone who wears a mask today is suffering from a new disease which I have identified called chronic maskitis.

Sufferers from chronic maskitis insist on wearing their masks whenever they are at risk of coming into contact with other human beings. They believe that their mask will help stop them inhaling a virus which may kill them.

Chronic maskitis sufferers will have almost certainly believed everything they've been told by their government, by the media and by the small army of media doctors now forever repeating the officially inspired lies.

Individuals with chronic maskitis will have almost certainly been jabbed – at least twice and probably more often – with a toxic, experimental substance which it is now proven does far more harm than good and is, as I predicted, now certain to kill far more people than the rebranded flu known as covid-19. And for those of us trying to win a war and save lives, it really doesn't matter a toss whether you believe the alleged disease is caused by a virus, an exosome or a 5G mast.

Way back in the early summer of 2020, I published material proving that masks were useless and certain to do more harm than good. At that time Fauci and Whitty agreed with me that mask wearing was a pointless and dangerous thing to do. Fauci referred to mask wearing as virtue signalling.

In March 2020, Dr Jenny Harries, Deputy Chief Medical Officer in the UK, warned that it is possible to trap the virus in a mask and start breathing it in. She said that wearing a mask was not a good idea. Professor Chris Whitty, the UK's Chief Medical Officer, said that wearing a face mask had almost no effect on reducing the risk of contracting covid-19, and that the Government did not advise healthy individuals to wear masks.

But then, for no good reason that I could see, the official line changed – virtually overnight. People were told that they should wear masks. Children in school were forced to wear masks all day long. Shop assistants and medical staff wore them with their visors, their goggles, their plastic gowns and their rubber gloves.

In June 2021 I was becoming so worried by the madness that I made a video entitled 'Most Mask Wearers will be dead or demented in ten years'.

I now worry that many of those suffering from chronic maskitis won't last that long.

Not surprisingly, vital evidence outlining the dangers and ineffectiveness of mask wearing has been banned, hidden or deleted from the internet. Public discussion and debate about the value of face masks has for 18 months now been suppressed by politicians and the media. The people at Google and YouTube will be directly responsible for millions of deaths. So will media doctors, people with PhDs and crooked fact-checkers who've supported their government's lies.

I've spent a long time digging out the real science on masks. In 2020, I wrote a new book entitled 'Proof that Masks Do More Harm than Good'. The book contains scientific references explaining precisely why masks are dangerous and don't do what people are told they will do. The book was banned, of course. A site called Smashwords took it down within days after I'd put it up free of charge. Thousands of people had downloaded it but the book disappeared.

It's worth remembering that thousands of years ago, it was discovered that forcing people to wear masks covering much of their faces broke their will and made them subservient. Masks depersonalised the wearers and dehumanised them. More recently, CIA torture techniques include forcing people to wear masks.

Mask wearers have been encouraged by the psy-op specialists to show their hatred for non-mask wearers. This loathsome ploy seems designed to make those who cannot or do not wear masks feel guilty and ashamed. The mentally and physically disabled will, therefore, be harassed and abused if they dare to go out of their homes. Maybe we should start a counter psy-op movement and spread the word that only ugly people wear masks.

The big problem with masks is that the reduced oxygen intake is accompanied by an increase in carbon dioxide intake. The tighter a mask fits the more likely it is to reduce blood oxygen levels and to increase the amount of carbon dioxide being inhaled. In my book I've quoted research proving that this is a real hazard.

I've also explained that lower oxygen levels and increased levels of carbon dioxide stimulate greater inspiratory flow – leading to a greater risk that loose fibres from the facemask will be inhaled.

Then there is the fact that face masks don't work. Between 2004 and 2016, at least twelve articles appeared in medical and scientific journals showing that face masks do not prevent the transmission of infection. And those tests were with approved masks rather than masks made out of old dish cloths, bras and bits of unwanted dress material.

Cloth masks fail to impede or stop flu virus transmissions, and the number of layers of fabric required to prevent pathogen penetration would require a suffocating number of layers and could not be used.

The World Health Organisation, which originally opposed face masks, now recommends that disposable masks should be worn and discarded after one use. And the evidence shows that they should be changed every two hours. Few people can afford to buy six masks a day and so masks are frequently worn more than once. This massively increases the risk of a chest infection developing.

There are lots of specific risks.

Way back in September 2020, a group of 70 doctors pointed out that children are badly affected by having to wear face masks. 'Mandatory face masks in schools are a major threat to their development,' they wrote. Teachers don't seem to care.

Dentists in New York reported seeing a number of patients with inflamed gums and other problems due to masks.

Sufferers from chronic maskitis are more likely to develop infection than non-mask wearers. This may be due to the fact that masks reduce blood oxygen levels and adversely affect natural immunity. It is likely that anyone who wears a face mask for long periods will have a damaged immune system – and be more susceptible to infection. Studies have shown

that hypoxia can inhibit immune cells used to fight viral infections. Wearing a mask may make the wearer more likely to develop an infection – and if an infection develops it is likely to be worse. Low oxygen levels reduce T cells and therefore reduce immunity levels.

Moreover, while the mask wearer thinks that they are becoming accustomed to re-breathing exhaled air, the problems within the brain are growing as the oxygen deprivation continues. Brain cells which die, because of a shortage of oxygen, will never be replaced. They are gone for ever. A leading neurologist has pointed out that children and teenagers must never wear masks, partly because they have extremely active and adaptive immune systems but also because their brains are especially active and vulnerable. The more active an organ is the more oxygen it needs. And so the damage to children's brains is huge and irreversible. She warns that dementia is going to increase in ten years, and the younger generation will not be able to reach their potential because of the mask wearing.

Chronic maskitis sufferers are likely to suffer skin problems too.

A dermatologist has warned that face masks traps warm moisture that is produced when we exhale. For those with acne, this can lead to acne flares. For many others, this warm, moist environment surrounding skin creates the perfect condition for naturally occurring yeast and bacteria to flourish and grow more abundant. This overgrowth of yeast and bacteria can produce angular cheilitis, the cracking and sores at the corners of the mouth.

And face masks cause eye problems too. Eye specialists say that chronic maskitis sufferers should wear goggles all day. Not dark glasses. Goggles. Swimming goggles, skiing goggles.

And here's another very real worry.

Investigators found loose particles on each type of mask'.

Studies have shown that loose fibres are seen on all types of masks and may be inhaled causing serious lung damage. One risk is pulmonary fibrosis – a disease which cannot be cured and has a poor survival rate. The references are all in my book.

It has also been reported that mask wearers may develop a sore throat. An infectious disease specialist reports that humidity will let bacteria continue to grow inside the mask so if you were growing bacteria in that area and you were breathing that inside, you can potentially get an infection, especially strep or any other bacteria that can cause infection.

Cancer patients who are in remission are more likely to find their cancer coming back if they wear a mask – because of the low oxygen levels.

The available medical evidence proves overwhelmingly that masks do no good in preventing the spread of infection but do a great deal of harm to those wearing them.

This is from the *New England Journal of Medicine*: The chance of catching covid-19 from a passing interaction in a public space is therefore minimal. In many cases the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.'

In the UK, if you don't wear a mask because you have decided you are exempt – and the Government says this is a personal choice – the official advice is that you should not routinely be required to produce any written evidence to justify the fact that you are not wearing a mask. Details are in the book.

When the truth finally comes out about the dangers of masks, teachers making children wear masks in schools will be sued. Bosses making their employees wear masks will also be sued. If you are told to wear a mask write down the name of the person forcing you to endanger your health. Put down the place and time and tell them to sign to confirm they are ordering you to wear a mask. Ignorance of the science will be no defence. And as the Nuremburg defendants discovered, the reply 'I was obeying orders' is no defence.

Appendix 2
Suppressed, Banned and Demonised
Vernon Coleman

I've been getting into trouble for years. I didn't want to get into trouble. And I didn't mean to get into trouble. But that's the way it's always been.

In 1964, at the age of 18, I went to Kirkby, Liverpool to spend a year as a Community Service Volunteer.

I arrived as a schoolboy, in a school blazer, tie and flannels. I spent my time there helping old people and working with an army of teenage school-children. I organised groups of teenagers to tidy gardens, paint flats and do shopping for lonely, housebound people.

Nine months later I had seen more of life than I'd seen in the previous 18 years. I had become a professional rebel – fighting for freedom and human rights and against injustices of all kinds.

When I started medical school, I carried on working with 'lost' teenagers in Birmingham. I recruited a couple of gangs and got the members to help me run a night-club in the city centre so that kids had somewhere to go in the evenings.

And I spent much of the 1960s and 1970s writing articles and columns which were critical of the establishment.

To begin with, the establishment was moderately tolerant.

My early books such as 'The Medicine Men' and 'Paper Doctors', (both published in the 1970s) were widely praised in the national press. The Guardian newspaper bought serial rights for the first and published a huge extract. The BBC made a programme about it.

During the 1970s and early 1980s, while working as a GP, I worked a good deal for both broadsheet and tabloid newspapers and for national TV stations. I wrote numerous columns and made several thousand TV and radio programmes. And I wrote a host of books which were mostly very well received and reviewed – appearing in the best-seller lists around the world. I was sued and served with injunctions and so on but probably no more than most authors.

My medical career came to an end in the 1980s when I was fined by the NHS because I refused to put diagnoses on sick notes. I felt that maintaining patient confidentiality was important. I resigned as a GP, though my protest resulted in a change in the regulations.

But then, at the end of the 1980s, there was a not very subtle change in the way the establishment treated original thinking: anyone who questioned the 'official' line was either actively suppressed or attacked. Any questioning of vaccination or vivisection, for example, drew violent attacks from the medical establishment and, in particular, from the pharmaceutical industry.

I was sued by all sorts of people, including a police force. (And I sued one back.) Most of the lawsuits were, I suspect, more to cause annoyance and waste my time. Because of my opposition to vivisection, I had MI5 and private detectives (hired by drug companies) chasing me and tracking me down. My mail was opened and two separate insiders told me that Special Branch had a growing file about me. I was 'door stepped' by journalists on more occasions than I like to remember. I was regularly filmed by police forces. I received writs so thick that they wouldn't fit through the letter box and had to be pushed through a cat flap. I've had papers relating to drug companies stolen from my home. And, of course, my phone has been tapped for years.

Overnight, I was banned in China where the Chinese Government was so annoyed by a weekly column I wrote for a big Chinese newspaper that they banned all my books in Chinese and also banned other 'foreign' authors. The column which caused the fuss was one in which I criticised vaccination.

In the UK I was banned from speaking to NHS staff because it was felt that I would be a threat to the pharmaceutical industry. I had been booked to speak about drug side effects at a large conference but I was replaced by a drug company representative.

I resigned from my last national newspaper column in 2003 after the editor refused to publish an article I had written criticising the Iraq war.

A serious death threat was investigated for many months by the police and by Interpol, and when I travelled to South Africa to speak against vivisection, I was met by an agent of BOSS within hours of arriving in Johannesburg.

After I exposed the way the AIDS 'crisis' had been exaggerated, I found that I was no longer invited to contribute to TV or radio programmes. And publishers around the world suddenly let my books go out of print or remaindered them – and refused to consider new titles. A German publisher had been selling large amounts of my books but my books disappeared overnight. The publishers did not respond when I asked for royalty statements. Much the same sort of thing happened around the world.

Book contracts were suddenly withdrawn and TV companies cancelled invitations. By the late 1990s, for no discernible reason, nasty articles about me started to appear in the national press. A nasty and inaccurate piece about me appeared in *The Spectator*. It was commissioned by Boris Johnson and written by his sister. (*The Spectator* had to publish a letter of correction.)

And then came the events of 2020.

In February and March of 2020, I questioned the claim that we were at the start of a major plague. My comments (all of which were entirely accurate and based on fact) proved deeply unpopular with the medical and political establishment.

Twenty years previously, I'd been allotted a Wikipedia page (though I had frequently asked for it to be removed).

Suddenly the content of the page was dramatically changed and distorted. Overnight, without any evidence, I became a conspiracy theorist and a discredited doctor.

All details of my books, TV series and columns were removed and replaced.

Wikipedia pages which had been put up about two of my book series (Mrs Caldicot and Bilbury) mysteriously disappeared. Google repeated the lies. It was clear this was all designed to make sure that no one took any notice of what I had to say.

Even the Wikipedia site relating to the award winning movie of my novel *Mrs Caldicot's Cabbage War* has been deliberately wrecked. The film had terrific reviews, is regularly shown on TV and has over 1,000 reviews at nearly 5 stars on Amazon but Wikipedia now shows only a one star review from the BBC. The only time I'm mentioned as the author, I'm described, inevitably, as a conspiracy theorist.

(Incidentally, some Wikipedia editors will remove rubbish from a page if you give them money. Then if it gets changed back they want more money to tidy it up again. It's probably quite a nice little earner for those Wikipedia editors.)

I was accused of spreading misinformation because the truth I was telling was considered inconvenient. I was wrongly accused of having been struck off the medical register. I was even accused of falsely claiming to be a doctor. Both print and broadcast media attacked me. I was accused of making videos to 'make money' though I had always refused to monetise them because I didn't want adverts on them. Telling the truth cost me a great deal of money, two years of my life (at a point when time is the one commodity I'm short of), a destroyed

reputation, a career in tatters and a constant stream of abuse from trolls working for the conspirators.

Four decades ago, my books were reviewed in most national newspapers and magazines, in countries all around the world. Today, my books are now never reviewed or serialised. Publishers in the UK and the US won't publish them and mainstream papers which regularly used to commission articles won't touch anything with my name on. (I've had four books banned in the last two years. Not even independent platforms will carry them.) It seems quite a price to pay just for telling the truth. None of those who has banned me or attacked me or accused me of spreading misinformation have ever found any inaccuracies in anything I've written.

YouTube removed my channel and banned me permanently. They even banned me from looking at other people's videos. Nothing in the videos I made was factually inaccurate. But YouTube doesn't seem to care about freedom or truth. Early on I suggested that lockdown victims should take vitamin D supplements. YouTube censored, removed and banned the video. A month or so later the Government issued exactly the same warning.

I then put my videos on a platform called Brand New Tube. Within a short time the platform was told it would be shut down if they continued to host my videos. The platform went abroad so that I could keep making videos.

I was refused permission to open a Facebook account or a Twitter account. My account on LinkedIn was suddenly closed without warning or explanation. I am not allowed any access to social media sites but fake sites have appeared in my name and are allowed to remain.

My website had been hacked and attacked for decades but for the last two years there have been at least 5,000 to 6,000 hacking attempts every month on the two main sites.

During the last two years, half a century of hard work and campaigning has been trashed and my reputation has been steadily destroyed by lies and libels on the internet and in the mainstream media. One national newspaper in the UK claimed that I was pretending to be a doctor. I have, inevitably, been threatened with legal action and I've received death threats.

Privately and professionally, sharing the truth in 2020 was the worst thing I ever did. It has brought me and my beloved, hard-working and constantly loyal wife nothing but personal and professional pain. It has taken up nearly every minute of my life for two years.

The aim of the attacks was not, simply to destroy me – it was to stop people listening to anything I said, or reading anything I wrote. Before March 2020 I had many millions of readers around the world. I wonder how many I have left now. Precious few, I suspect. How do people know that the word 'discredited', plucked out of thin air and applied to my name by Google, is just a libel and not a fact? How many know that the ASA which is quoted is a private organisation funded by advertisers?

I was expelled from the Royal Society of Arts because 'of my views and my recent involvement in the BBC Panorama programme'. That's what they said. This seemed to me to be a bit like arresting someone because they'd been mugged. (I was never invited to appear on the programme they mentioned. The BBC boasts that it won't ever give airtime to those questioning vaccination 'whether they're right or wrong'.)

The abuse on social media grew and grew. It isn't normal, unpleasant social media abuse. It is a campaign of suppression and oppression, decorated with malicious lies, and threats (including death threats) invented to help keep the truth suppressed.

If my videos or articles are put on sites such as YouTube by other people they are taken down within minutes.

Someone watches everything I do. In May 2022, a publisher working outside the UK and the US finally produced an English language paperback version of my thrice banned book 'Covid-19: The Greatest Hoax in History'. I mentioned the book's publication on my website. Within hours the publisher's PayPal account was closed making it difficult for him

to sell books by mail order. He then opened another payment account with a different company and, almost immediately, that account was also closed.

And on it goes. There is much more but I expect you are as bored with reading this sorry tale as I am of writing it.

Everything I've written was absolutely accurate, and time and time again my predictions have been correct. The videos I've made are still available on www.vernoncoleman.org and my articles are available there and on www.vernoncoleman.com

I tell you all this to show just how bad things have become, how the truth is suppressed and how whistle-blowers and truth-tellers are mercilessly and ruthlessly demonised.

My accusers and detractors will never debate with me. They are not interested in the truth – only in propaganda.

The question I ask myself often is an obvious one.

'Would I do it again?'

The answer is: 'I hope so.'

Hell of a price, though.

I know I'll never have an article published in a mainstream newspaper or magazine again. None of my books will again be published by mainstream publishers. None of my books will ever be reviewed or mentioned. And I'll be reviled and libelled online for as long as my name remains.

Hell of a price for telling the truth.

Taken from the Appendix at the back of the book *Social Credit: Nightmare on Your Street* by Vernon Coleman.

Copyright Vernon Coleman June 2022

We're living in a Totalitarian Society – Here's the Proof

Dr Vernon Coleman

On Saturday 25th June 2022 I was due to talk to Professor Dolores Cahill on her show on TNT radio. I was looking forward to it very much indeed.

I telephoned the studio number in Australia and I spoke to the engineer.

All was going perfectly well.

But I was cut off before I could speak to Professor Cahill.

I telephoned three times.

Three times I managed to speak to the engineer. There was no problem with the line or the connection.

But each time the engineer tried to connect me to the programme the line was cut.

This wasn't a technical error.

It was a deliberate act of crude censorship.

Some outside agency (I don't know which one and I don't know which government it was working for) hacked into the line and prevented me speaking on TNT radio to share the truth.

It was sophisticated blocking and this wasn't the first time this has happened.

Indeed, it has happened countless scores of times over the last three or four decades.

I recently wrote a piece for my website entitled 'Suppressed, Banned and Demonised' outlining some of the ways in which governments have successfully silenced me during the last few years – and particular since March 2020 when I first exposed what I then called the 'coronavirus hoax'.

During the last week or so, the security agencies have also blocked access to my new book 'Social Credit: Nightmare on Your Street' – blocking the connecting link from my video of the same name.

You may think that silencing one author doesn't matter very much.

But it matters enormously.

It strikes right at the heart of our right to freedom of speech.

Politicians, newspaper editors and broadcasters talk constantly about the importance of freedom of speech.

But the plain fact is that we now have no freedom of speech.

For two and a half years, everything I have said has been absolutely accurate.

But for telling the truth I've been lied about constantly by mainstream journalists, by government agencies, by internet giants and by bought for fact checking agencies.

Why?

Because I have been sharing truths that they don't want sharing.

The authorities are terrified of the truth and they will do whatever they have to do to suppress it.

Can you imagine the fuss that would be made if a pro-vaccine doctor or a climate change protestor were silenced and blocked and hacked and prevented from speaking on a radio programme?

No! They must be allowed to tell endless lies.

But I must not be allowed to tell the truth.

We are clearly now living in a totalitarian society where only those telling officially acceptable lies may speak.

There is no debate because no one promoting vaccines, masks, lockdowns and the lunacies of climate change will dare debate with me.

And they won't dare debate because they know they will lose. I have all the facts. They have only rhetoric and lies.

Nothing will change until more people find the time and the courage to stand up and make their voices heard.

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Afterword

There is absolutely no scientific reason for mask wearing under any circumstances. The covid-19 hoax is an IQ test. Anyone who wears a mask after studying the evidence has clearly failed the test.

Dear Reader

If you found this book useful I would be enormously grateful if you would post a review on social media or your preferred online site. It would help a great deal more than I can tell. And please ask everyone you know to read this book. Thank you

Vernon Coleman

The Author

Biography and reference articles – included here to help counteract the lies on mainstream media and the internet.

Vernon Coleman was educated at Queen Mary's Grammar School in Walsall, Staffs. He then spent a year as a Community Service Volunteer in Liverpool where he was the first of Alec Dickson's 'catalysts'. (Ref 1 below). He studied medicine at Birmingham Medical School and qualified as a doctor in 1970. He has worked both in hospitals and as a GP. He resigned from the health service on a matter of principle. (Ref 2 below).

Vernon Coleman has organised many campaigns concerning iatrogenesis, drug addiction and the abuse of animals, and has given evidence to committees at the House of Commons and the House of Lords. For example, he gave evidence to the House of Lords Select Committee on Animals in Scientific Procedures (2001-2) on Tuesday 12.2.02

Dr Coleman's campaigns have often proved successful. For example, after a 15 year campaign (which started in 1973) he eventually persuaded the British Government to introduce stricter controls governing the prescribing of benzodiazepine tranquillisers. ('Dr Vernon Coleman's articles, to which I refer with approval, raised concern about these important matters,' said the Parliamentary Secretary for Health in the House of Commons in 1988.) (Ref 3 below).

Dr Coleman has worked as a columnist for numerous national newspapers including The Sun, The Daily Star, The Sunday Express, Sunday Correspondent and The People. He once wrote three columns at the same time for national papers (he wrote them under three different names, Dr Duncan Scott in The Sunday People, Dr James in The Sun and Dr Vernon Coleman in the Daily Star). At the same time he was also writing weekly columns for the Evening Times in Glasgow and for the Sunday Scot. His syndicated columns have appeared in over 50 regional newspapers in the United Kingdom and his columns and articles have appeared in newspapers and magazines around the world. Dr Coleman resigned from The People in 2003 when the editor refused to print a column Dr Coleman had written criticising the Government's decision to start the Iraq War. (Ref 6 below)

He has contributed articles and stories to hundreds of other publications including The Sunday Times, Observer, Guardian, Daily Telegraph, Sunday Telegraph, Daily Express, Daily Mail, Mail on Sunday, Daily Mirror, Sunday Mirror, Punch, Woman, Woman's Own, The Lady, Spectator and British Medical Journal. He was the founding editor of the British Clinical Journal. For many years he wrote a monthly newsletter called Dr Vernon Coleman's Health Letter. He has worked with the Open University in the UK and has lectured doctors and nurses on a variety of medical matters.

Vernon Coleman has presented numerous programmes on television and radio and was the original breakfast television doctor on TV AM. He was television's first agony uncle (on BBC1's The Afternoon Show) and presented three TV series based on his bestselling book Bodypower. In the 1980s, he helped write the algorithms for the first computerised health programmes – which sold around the world to those far-sighted individuals who had bought the world's first home computers. (Ref 4 below). His books have been published in the UK by Arrow, Pan, Penguin, Corgi, Mandarin, Star, Piatkus, RKP, Thames and Hudson, Sidgwick and Jackson, Macmillan and many other leading publishing houses and translated into 25 languages. English language versions sell in the USA, Australia, Canada and South Africa as well as the UK. Several of his books have appeared on both the Sunday Times and Bookseller bestseller lists.

Altogether, he has written over 100 books which have, together, sold over two million copies in the UK alone. His self-published novel, Mrs Caldicot's Cabbage War has been turned into an award winning film (starring Pauline Collins, John Alderton and Peter Capaldi) and the book is, like many of his other novels, available in an audio version.

Vernon Coleman has co-written five books with his wife, Donna Antoinette Coleman, and has, in addition, written numerous articles (and books) under a vast variety of pennames (many of which he has now forgotten). Donna Antoinette Coleman is a talented oil painter who specialises in coastal landscapes. Her books include, My Quirky Cotswold Garden. Vernon and Antoinette Coleman have been married for more than 20 years.

Vernon Coleman has received numerous awards and was for some time a Professor of Holistic Medical Sciences at the Open International University based in Sri Lanka.

Reference Articles referring to Vernon Coleman

Ref 1

'Volunteer for Kirkby' – The Guardian, 14.5.1965
(Article re VC's work in Kirkby, Liverpool as a Community Service Volunteer in 1964-5)

Ref 2

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(Vernon Coleman resigns as a GP after refusing to disclose confidential information on sick note forms)

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'Computer aided decision making in medicine' – British Medical Journal, 8.9.1984 and 27.10.1984

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'Conscientious Objectors' – Financial Times magazine, 9.8.2003

Major interviews with Vernon Coleman include

'Doctor with the Common Touch.' – Birmingham Post, 9.10.1984

'Sacred Cows Beware: Vernon Coleman publishing again.' – The Scotsman, 6.12.1984

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'Reading the mind between the lines.' – BMA News Review, November 1991

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There is a more comprehensive list of reference articles on www.vernoncoleman.com

