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The law of silence (I)

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“**T**he COVID-19 pandemic is one of the most manipulated infectious disease events in history, marked by official lies poured out in an endless stream directed by government bureaucracies, medical associations, the media and international organizations¹”. This description, made by a physician, the American neurosurgeon Dr. Blaylock, fits what you are about to discover in this article.

We will see how the danger of covid was grotesquely exaggerated in order to create a mass hysteria that would lead the population towards mass vaccination, for the unbridled profit of Big Pharma. We will also see how these hastily developed and poorly tested vaccines have been shown to be ineffective and caused an unprecedented level of adverse effects, facts that are scientifically documented but which the political-media-pharmaceutical complex tries to conceal under a cloak of silence. The politicians who imprisoned us and played dictator, the media in charge of keeping the population in a constant state of terror and the greedy pharmaceutical industry, always prone to medicate the healthy (much more numerous than the sick), do not want the truth to be known.

Thus, the unspeakable media terror campaign, a true act of terrorism ("domination by terror") that has made part of the population mentally ill, had a double objective: to create a hysterical atmosphere that would fertilize the totalitarian experiment that we have suffered and to prepare the population to crave for injections of botched "vaccines" and largely experimental gene therapies. What has been the result? The virus is of course still circulating (it could not be otherwise), but Pfizer has doubled its sales figures in a single year thanks to its covid "vaccine" and Moderna has gone from sales of \$800 million and huge losses to revenues of \$18 billion and profits of \$12 billion.

Vaccine requirements

Vaccines have been a great discovery in medicine², but in compliance with the Pareto Principle, very few can be considered extremely successful. Indeed, the enormous success of the smallpox vaccine (the original) or the polio vaccine, both famous for good reason, has not been easily replicated and, in fact, antibiotics such

¹ [TX 1~ABS:AT/TX 2~ABS~AT \(surgicalneurologyint.com\)](#)

² [Caution with the Covid vaccine - Fernando del Pino Calvo-Sotelo \(fpes.es\)](#)



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as penicillin or products such as DDT (which helped eradicate malaria in a large part of the planet) have saved, in order of magnitude, many more lives than vaccines.

Although for most vaccines in common use the benefits far outweigh the risks, most of the vaccines we have all taken in our lifetime or given to our children prevent diseases of very low lethality or with very low risks of developing serious symptoms or sequelae. Others simply avoid the worry of having a heavy illness, more than anything else, but do not significantly reduce mortality. In fact, after more than 200 years of scientific research, there are only a dozen approved vaccines based on live but attenuated viruses, most of them covering diseases of low lethality³.

Therefore, it is not easy to develop vaccines, which always have three requirements: necessity, effectiveness and safety. Do covid "vaccines" meet these requirements? As we will see throughout this article, the answer is clearly no. However, the failure of these "vaccines", aggressively promoted by the pharmaceutical industry, the public authorities and the media, is being silenced by their promoters for obvious reasons, as we are probably facing the biggest public health scandal in history.

Covid, a mild disease?

Before proceeding further, it is worth clarifying that for the sake of simplicity we will call mRNA inoculations against covid "vaccines" or gene therapies indistinctly, the latter being a more accurate designation, as is clear from the medical literature or from Moderna's own documentation submitted to the SEC in 2020 ("mRNA is currently considered a gene therapy by the FDA⁴"). The obvious reason why they were called "vaccines" was to gain public acceptance, as a senior pharma official acknowledged: "mRNA vaccines are an example of gene therapy, and if we had asked the public two years ago if they were willing to have a gene therapy injected into their body, probably the rejection rate would have reached 95%⁵". The make-up went so far that the CDC itself modified on the fly in 2021 its definition of "vaccine" and "vaccination" to include mRNA inoculations⁶.

To be necessary, a vaccine must prevent a potentially serious disease for the target population in its clinical or sequelae (that is why only the elderly are vaccinated against influenza). Given that from the beginning covid was only dangerous for a segment of the population narrowly defined by age, by four concomitant pathologies (obesity, hypertension, diabetes and cardiopathies) and,

³ [Successful Vaccines - PMC \(nih.gov\)](#)

⁴ [mrna-20200630 \(sec.gov\)](#)

⁵ [Bayer executive: mRNA shots are 'gene therapy' marketed as 'vaccines' to gain public trust - LifeSite \(lifesitenews.com\)](#)

⁶ [Why did CDC change definition for 'vaccine'? Agency explains | Miami Herald](#)



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curiously, by sex (adult women had half the risk of men), this would have reduced the vaccination campaign to the population at risk, fundamentally those over 65 and people with comorbidities. Thus, for the vast majority of the population the requirement of necessity was never met, as for them covid was always a statistically mild disease.

However, with its well designed terror campaign, the political-media-pharmaceutical complex succeeded in convincing the population that covid was extremely dangerous for everyone. This was not true. In Spain, official data from the Ministry of Health showed that, even in the worst of 2020, while covid lethality or mortality (IFR) was 4% in people over 70 years of age (96 out of every 100 infected survived), it fell to 0.3% in people between 50 and 70 (997 out of every 1,000 survived) and was very close to zero in healthy people under 50⁷.

In other countries the data were similar: more than 90% of those over 80 who contracted covid survived, as did 99% of those aged 65-70, 99.9% of those aged 45-50 and 99.99% of those aged 30-35⁸. In those under 18 years of age who contracted covid the survival rate was at least 99.995% (and nearly 100% for those in good health). To clarify matters even more, of all deaths from all causes in this age group in the first year of the epidemic less than 1% died from covid⁹ (99% died from accidents or other diseases of which the media are silent). I repeat that these data correspond to the beginning of covid, when it was more serious. After the gradual reduction of lethality¹⁰ and, above all, after omicron, which has a lethality up to 80% lower than that of the first strains of the virus¹¹ and is less serious than influenza¹² (mostly paucisymptomatic), today the above-mentioned lethality figures can easily be divided by 5. It could even be said that Omicron has immunized the population much more effectively (for all) and more safely (for some) than the promoted "vaccines" or gene therapies.

The great deception

These lethality data will come as a surprise to those who have been fed by media horror stories but not to any epidemiologist, immunologist or statistician who has followed the data. In fact, John Ioannidis, a well-known epidemiologist at

⁷ [ITCoronavirus.pdf \(sanidad.gob.es\)](#)

⁸ [Age-specific mortality and immunity patterns of SARS-CoV-2 | Nature](#)

⁹ [Deaths in Children and Young People in England following SARS-CoV-2 infection during the first pandemic year: a national study using linked mandatory child death reporting data | medRxiv](#)

¹⁰ [Variation in the COVID-19 infection-fatality ratio by age, time, and geography during the pre-vaccine era: a systematic analysis - PubMed \(nih.gov\)](#)

¹¹ [Reduction in the infection fatality rate of Omicron variant compared with previous variants in South Africa - International Journal of Infectious Diseases \(ijidonline.com\)](#)

¹² [New Analysis: Covid's Infection Fatality Rate Now Same as Seasonal Flu - The Daily Sceptic and Vaccines and Omicron mean Covid now less deadly than flu in England | Financial Times \(ft.com\)](#)



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Stanford University, was already reassuring in May 2020 about the mildness of covid for the vast majority of the population¹³, but the media systematically silenced this crucial information. On the contrary, they created and chronified an unhealthy alarmism.

These lethality data come from dividing the number of deaths by the number of infected persons as shown by the seroprevalence studies, so that the real mortality would be even lower than that shown. Why? First, because the data on deaths did not distinguish between those who died *from* covid and those who died *with* covid but from other concomitant pathologies (or from a traffic accident). Second, because the seroprevalence studies only detected IgG antibodies, ignoring both cellular immunity and IgA antibodies (predominant in the mucosa), and therefore underestimated the number of people who had passed the disease. Therefore, the real numerator of the ratio was lower and the denominator, higher.

With these numbers in hand, there can be no doubt that the fact that the political-media-pharmaceutical complex publicized the most alarming cases with a daily bombardment and silenced the scientific evidence on the statistical mildness of covid for the vast majority of the population was a deliberate deception. With what purpose? So that the population would accept without complaint dictatorial restrictions on their freedoms and, above all, so that they would consent to (even desire) an indiscriminate vaccination program with vaccines and genetic therapies that had been poorly tested, for the exorbitant profit of Big Pharma?

"There are not diseases in general, but sick individuals", says a well-known medical dictum, meaning that for any medicine to be prescribed, the benefits for each particular patient must be weighed against the potential risks for that particular patient. If with covid the risk for a young person was 1,000 times lower than for an elderly person, how could it be justified to vaccinate both just the same? How could it be stated generally that the benefits of these "vaccines" outweighed the risks? For some, perhaps; for others, clearly not.

The conclusion is clear: it was never necessary to vaccinate healthy people under 50 or 55 (to be prudent) against covid, certainly not those who had already had the disease (who were protected by the superior natural immunization), nor, above all, teenagers and children, an absolute immorality by which they were subjected to a risk to their health without any medical benefit worth mentioning. The vaccine fanaticism, created by the powers that be, reflects a morally sick society that puts its children at risk in order to calm hysterical adults.

¹³ [The infection fatality rate of COVID-19 inferred from seroprevalence data | medRxiv](#)



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As we have seen, the requirement of necessity was only met for a minority segment of the population and in no case justified a voluntary-compulsory, massive and indiscriminate vaccination program, for which the weapon of social pressure was used through the shameful stigmatization and discrimination of those unvaccinated, a superstitious witch-hunt typical of the Middle Ages. But what about the other two requirements for any vaccine: have these "vaccines" been effective or rather a joke? Have they been safe or rather dangerous? We will elaborate on these issues in the second part of this article.

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