

COVID-19 Pandemic, Part III: Assessment

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Abstract

In this paper there will be described the current knowledge of the COVID-19 Pandemic and shameful involvement of the mass media in the spread of false information, and the role of pharmaceutical industry, some politicians, and the World Health Organization (WHO) in this disaster. The ground publications of some scientific journals during the last decades, the misuse of the Pharmacopoeias and pharmaceutical industry publications in scientific journals are shown in the publications

<http://dx.doi.org/10.1016/j.jchromb.2003.09.042>,

<http://dx.doi.org/10.4236/ajac.2012.36058>,

<http://dx.doi.org/10.4236/ijamsc.2013.12010>, as well as hiding the truth about the highly contaminated drugs

<http://dx.doi.org/10.1016/j.jchromb.2003.09.042> by the World Pharmacopoeia, the national Pharmacopoeias, and misuse of the WHO authority. There is no doubt that the Global hysteria with the “COVID-19 Pandemic” had multiple reasons, multiple aims and it was a result of more profound social, administrative, and economic crisis. This crisis does not end but gains more dangerous and uglier forms as society transformation from democracy and pseudo-democracy to a type of socialistic-fascistic/terroristic societies and to wars that have been spread over the Globe. One thing is clear: the COVID-19 virus was manmade, that the media’s hysteria under the title “The COVID-19 pandemic” together with the acts of lockdown and mandatory vaccination in my opinion were the biggest Global crime against population. The COVID-19 pandemic has been the only link in the long chain of history of the society evolution since the appearance of the states as organized entity which supports the Mancur Olson’s theory about the state as a “Stationary Bandit”

<https://www.bing.com/search?q=Mancur+Olson%E2%80%99s+theory+about+the+state+as+a+%E2%80%9CStationary+Bandit%E2%80%9D&form=ANNTH1&refig=47ba90ac4629476e9e80d43eb15245dc&pc=LCTS>. The lack of

usefulness together with the presence of harmfulness of the conducted anti-pandemic efforts will be discussed in the paper and in the future papers

with the common title.

Keywords

Virus Infection, Global Hysteria, COVID-19 Pandemic, QR-Code

The power of government rests on the ignorance of the people, and it knows this and therefore will always fight against enlightenment.

Leo Tolstoy

1. Introduction

This series of papers was written during the COVID-19 pandemic and was continued in the time when suddenly all madness of the pandemic was stopped, forgotten, and even was not mentioned in the media anymore. It is happened in a very short period as when yesterday it was criminal to appear without of mask, but today it is a normal to appear without a mask, or travel without being vaccinated (16.08.23 New Zealand was the last country which abolished all the restrictions). Today all this hysteria and madness have been quit and forgotten all over the Globe. However, the mass media and some politicians are trying to start the restriction of the population, freedom hysteria and possibly to introduce a new modification of the viral infection as “Pyrrole” in the coming autumn-winter season again.

Pre-, During and Present Events

After analyzing the events of pre-, during- and present status of the Pandemic it is difficult to not to come to the conclusion that the pandemic is manmade https://m.youtube.com/watch?v=FE_20jDOn_Q. Later on, Jan 12, 2022, other reports and evidence about crime came

<https://www.youtube.com/watch?v=vRY5i5P74K0>, but this reference was deleted from YouTube. However, their records must be in the USA’ Congress. By deleting important documents in the form of video documents YouTube exposed itself as the media hiding the criminal acts

<https://www.youtube.com/watch?v=P5TvU4q2J1s>,

<https://www.youtube.com/watch?v=tJ6UDyeiA5M>,

<https://www.youtube.com/watch?v=Wsn3G9wmaFI>. It should be mentioned that the former president of the USA Barack Obama issued the restriction mandate on experiments with the actual virus. The next former president Donald Trump revoked this restriction.

The declaration of the pandemic was used by the mass media to produce a state of hysteria. This hysteria was used by governments in different countries with the attempts to solve their political, administrative, and economic problems. The reasons were: the Global economic crisis, the looming shift of the center of gravity in the Global economic and military power from the USA to

China, mass migration of humans initiated in order to gain votes from migrants for some politicians and political parties' advantages in voting <https://www.youtube.com/watch?v=zY1pMl8rbiQ> (this information also was deleted from YouTube), and preparation to a new Global war and for many other reasons from hiding private criminality to attempts to reduce and change ethnic, religious, and demographical composition of the Global population. The reasons also were the attempts to put an end to globalization and the restoration of national laws and to restrict the flow of immigrants and goods as it was done with Brexit. Mass migration cannot be stopped without such plausible reasons as lockdown in the time of pandemic or war. No war can be started without preliminary testing of the level of the crowd stupid behavior. The declaration and hysteria of the pandemic gave positive results. However, when governments tried to introduce mandatory vaccinations and green passports, they failed. Nearly all global population came in vigorous protests <https://www.youtube.com/watch?v=h-R6NvI1zmg>, <https://www.youtube.com/watch?v=suOocJnrKLw>, <https://www.youtube.com/watch?v=eb0wpH-2iOI>, <https://www.youtube.com/watch?v=tHpZ2vqJbMA>, <https://www.youtube.com/watch?v=7fRVt59EPsQ>, <https://www.youtube.com/watch?v=xtc-y-ybOSo>, <https://www.youtube.com/watch?v=-6TnkcFGR48>, <https://www.youtube.com/watch?v=tqiLA9Ucfps>, <https://www.youtube.com/watch?v=3daPmi49u3A>, <https://www.youtube.com/watch?v=WFPE7R-MGNo>, <https://www.youtube.com/watch?v=wTf8NUk2XKM>. The fear of revolt and the governments overpowering in many countries was a reality. All mandatory vaccination was stopped nearly on the same day all over the Globe. A new temporary release of the Global economic crises was found in the ignition of wars.

2. Virus

Some specificity of viruses as living units were mentioned in ((a) Brondz, 2020a), ((a) Brondz, 2021a), ((b) Brondz, 2021b). The main problem up to date is a miss accept that virions are not a live unit. Viruses have all spectrum of essential organic, and some inorganic molecules like the other living organisms. They exhibit specific chemotaxis, conserving energy to perform adhesion to the cell receptor and have to perform ability for penetration in the target cell through the cell membrane. The disability to reproduce themselves without the target cell is not an essential peculiarity of a living unit. Scientists do not deny the recognition of the plant' pollen or mammal spermatozoid to be a living unit, because without favorable conditions or a target cell they cannot give multiplication.

Darwin introduced harmful postulates (Darvin, 1859) in his publication "On the Origin of Species" (Freeman, 2002). Darwin's theory lacks an important point in the appearance of new species which is positive mutations ((b) Brondz, 2021b). Together with harm viruses also perform useful and important functions

such as immunization and the appearance of a new species. Some effects of mutations induced by viruses are negative, however other effects are positive ((b) Brondz, 2021b). These positive mutations with selection give progress (the appearance of a new species) in the development of living organisms. Humans use some viruses-bacteriophages as a useful tool (Grath & Douwe van 2007).

2.1. The Discovery of Viral Infection

A virus in Latin has the meaning “poison”. In 1898 Martinus Willem Beijerinck (1851-1931) the founder of virology, discovered a viral particle and thus supported the observation of Iwanowski, D., (Iwanowski, 1892). Iwanowski published the paper about an infectious object that was smaller than bacteria and filtrated through bacterial filters several years before Beijerinck. Beijerinck named these particles: “*contagium vivumfluidum*” (Beijerinck, 1898). Sizes and shapes of viruses display a wide diversity. Spherical viruses like corona viruses have a diameter of between 20 and 300 nanometers and can easily filtrate through Seitz bacterial filter. The pores of Seitz bacterial filter are so fine that they do not let bacteria pass, solutions emerge sterile, without bacteria, but not without of viruses.

2.2. The History of Epidemics, and Pandemics in the Past

It is well described in Islamic history that at the time when Great Prophet Muhammed with his followers escaped from Mecca to Medina, they suffered from Malaria more than indigenous dwellers in Medina. The reason was a mutation which occurred in the red blood cells of indigenous dwellers in Medina. This mutation protected them from malaria infection; however, the newcomers were heavily exposed to malaria (Irving, 1991), (Brondz, 2011).

Massive migration, influx of people as invaders and refugees (in war or famine time), or as economic migrants contributed to epidemics and pandemics. Malaria is an infection with protozoa. It was eradicated in developed countries by the end of the 19th- the beginning of the 20th centuries. “*However, malaria is no longer restricted to the poor areas of the world, but has returned to southern Europe countries including Italy, France, some countries in the Caucasus*” (Brondz, 2011). “*Human migration was a key factor in the global dissemination of malaria [1]*” (Brondz, 2011), (Schlagenhauf-Lawlor, 2008).

Our genetic code bears information about interaction with different infectious organisms which happened in the past long before present. In Scandinavia some indigenous people are more resistant to HIV infection than others. “*The mutation is found principally in Europe and western Asia, with higher frequencies generally in the north. Homozygous carriers of the $\Delta 32$ mutation are resistant to HIV-1 infection ...*” (Novembre, Galvani, & Slatkin, 2005), (Loo, Y.M. et al., 2008), (Loo & Gale, 2007). Some individuals on the British islands are more resistant to HIV, HIV-1 than the main population of North Europe. It is attributed to the generation that survived after the infection of Plague (*Yersinia pestis*). Plague is an infection with bacteria. “*The high frequency, recent origin, and*

geographic distribution of the CCR5-Δ32 deletion allele together indicate that it has been intensely selected in Europe. Although the allele confers resistance against HIV-1, HIV has not existed in the human population long enough to account for this selective pressure. The prevailing hypothesis is that the selective rise of CCR5-Δ32 to its current frequency can be attributed to bubonic plague” (Galvani & Slatkin, 2003). HIV strains are unable to enter macrophages which carry the CCR5-Δ32 deletion; the average frequency of this allele is 10% in European population. A mathematical model based on the changing demography of Europe from 1000 to 1800 AD demonstrates how plague epidemics, 1347 to 1670, could provide the selection pressure that raised the mutation frequency to the level seen today. It is suggested that the original single mutation appeared over 2500 years ago and that persistent epidemics of a haemorrhagic fever that struck in the early classical civilizations served to raise the frequency to about 5×10^{-5} at the time of the Black Death in 1347 (Duncan, Scott, & Duncan, 2005).

“The disappearance of the native Neanderthal population in Europe can be attributed to infectious diseases that were introduced by newcomers: Homme de Cro-Magnon. If infections were not the main cause, it is difficult to ignore that they were among the important causes of the disappearance of the Neanderthal population in Europe” (Brondz, 2016). Epidemics were recorded as early as in the Neolithic Age. Recently/ in 2018 in Sweden graves of people of the Neolithic Age were found. Traces of bacteria Yersinia pestis were found in these graves. In the Neolith in Europe people lived in settlements (villages), knew the pottery, cultivated crops, already domesticated dogs and possibly pigs. Pigs as infection’ sources were described in ((b) Brondz, 2020b). Neolith people’ migration was restricted to the neighboring areas. Migration of people is a significant factor in spreading of infections and epidemics (Schlagenhauf-Lawlor, 2008), (Brondz, 2011), (Akira, 2015). Human migration is the key factor in the global dissemination of epidemics (Brondz, 2011).

The signs of the first documented epidemic in humans’ history can be traced to 4000 BC, it is about 6.000 years ago. At that time there was a significant decrease in human activity in Europe, many villages were empty and the number of inhabitants in other villages decreased significantly. One of the explanations of this decrease the Epidemic of Plague which correlated to the discovery of bacteria *Yersinia pestis* in the corpses in graves attributed to this time.

In the fourth century, Attila and his army brought black rats to Europe in their string of carts. In the twelfth century, Genghis Khan and his army brought grey rats to the doorstep of Western Europe in their string of carts. Black and grey rats originated in Asia. From 1346 - 1353 in Europe, rodents were the main cause of the spread of the most devastating pandemics in human history, the Black Death, or Black Plague, which resulted in the death of estimated 75 - 200 million Europeans. The black and grey rats brought by Attila’s army and by Genghis Khan’s army in the Roman and Medieval periods nearly killed all European population <https://www.eurekalert.org/news-releases/951573>, (Brondz, 2016).

..., in South America, indigenous women infected Spanish Conquistadors with syphilis. Syphilis was not known in Europe before the mass return of the Spanish Conquistadors from America to Europe. In the beginning, the disease was even known under the name of "Spanish illness" [7]. Syphilis was a significant source of harm to fecundity among the European population before the introduction of condoms and antibiotics. Today, syphilis remains a serious illness with significant health consequences (Brondz, 2016). The infection agent in the case of Syphilis is *Treponema pallida*, a strict intracellular parasite which is simpler than bacteria. This is an infection agent, which cannot be reproduced outside the host cell.

The viral Pandemic devastated the global population in 1918-1920. The infections' agent was the virus *Influenza A virus subtype H1N1*. The first documented case was recorded in spring 1918 in Kansas, the United States, in military barracks. Later the troopers from this regiment were transported to France. Two years later, about 500 million people, were infected. Estimated death rate was from 25 million to 50 million. The unique feature of this pandemic was that it mostly affected younger populations in the 20 - 40-year age group (Barry, 2005). The plausible explanation is that about fifty years before there was a global bacterial or viral epidemic which resulted in the remain of positive mutation in the genetic code of the population as immunization (Duncan, Scott, & Duncan, 2005). The younger population lacked this positive genetic information. The description of the virus *Influenza A* epidemic in Japan can be found in publication (Akira, 2015). This *Influenza A* virus subtype *H1N1* was not conserved as it could be studied. The pandemic was short lived, and the virus disappeared, probably, because of "self-suicidal destruction". It was the *Influenza A* virus subtype *H1N1*.

What could be expected from correctness of death data from Spanish Flu in 1918-1920, if even today we see controversial data about the number of death cases from virus COVID-19 diseases alone and the number of death cases as an aggravation of preconditions, with additionally infected by COVID-19 diseases? The WWI was in its endgame, it was beneficial for governments to hide the active military losses under the losses from Spanish Flu. The Italo-Turkish, Greco-Turkish and the National Liberation Turkish wars were in the action at that time, and it was attractive to hide some victims killed in war-atrocities Genocide perpetrated by Turks against Armenians, Assyrians, Greeks, Arabs-Christians as the losses from Spanish Flu. At the same period there was the revolution and the Civil war in Russia with prodigious murdering of civil population, Jewish pogroms perpetrated by both sides- the White and the Red, and by numerous band formations. From the executors of these deeds to all conflicting sides the declaration of most of these victims as the losses from Spanish Flu were preferable. Besides, during the revolution and the Civil war in Russia there was an outbreak of Typhus. Many dead from Typhus were counted as the losses from Spanish Flu. During the revolution and the Civil war in Russia there was a horrible hunger. In some lands in Europe: Germany, parts of former Austro-Ungar Empire,

parts of former Ottoman Empire there was a severe shortage of food supply. All victims were politically-correctly counted as losses from Spanish Flu. The mass media also played a significant role in this misinformation.

There are some strains of *H1N1* endemics in humans and they cause such illness as seasonal influenza, in 2004-2005 the well-known outbreaks of *H1N1* strains as Russian Flu pandemic in 1977 (caused by strain *Influenza A/USSR/90/77 (H1N1)*) and infective for humans Swine Flu pandemic in 2009 (*influenza A virus subtype H1N1*).

3. The Medical Mask as Protecting Devices against COVID-19 in comparison with the Medical Mask of the Middle Ages

The aim of the comparison of the Medical Mask from the Middle Ages with the mandatory masks is to show the uselessness and harmfulness of the mandatory mask for an individual wearing it.

3.1. The Medical Mask of the Middle Ages

Ancient masks were known even before the Middle Ages. However, they were somewhat different from the modern ones. The clothes and medical mask which were used in the Middle Ages by priests, medical personnel, and men who collected from the streets and buried the dead during the epidemics are shown in <https://www.bing.com/images/search?view=detailV2&ccid=IRQf11Xj&id=FF99DE646EA58719520C2915A8B86768618063D9&thid=OIP.IRQf11XjXb93CyHF8pF8nQAAAA&mediaurl=https%3a%2f%2fwww.gutenberg.org%2ffiles%2f63232%2f63232-h%2fimages%2fcover.jpg&cdnurl=https%3a%2f%2fth.bing.com%2fth%2fid%2fR.21141fd755e35dbf770b21c5f2917c9d%3frik%3d2WOAYWhnuKgVKQ%26pid%3dImgRaw%26r%3d0&exp=758&expw=474&q=the+epidemics+of+the+middle+ages&simid=608044400396476773&FORM=IRPRST&ck=9D525BF4E5882EAE0815E9FF3B7EE2CB&selectedIndex=0&idpp=overlayview&ajaxhist=0&ajaxserp=0>.

3.2. The Protection and Lack of Protection of the Medical Mask in Comparison to the Middle Ages Equipment.

The lack of protection of the mandatory masks during the COVID-19 was obvious. The higher transmissibility of COVID-19 in comparison to the Common Flu is questionable and fundamentally different. The Common Flu is transmitted by droplets of different size, but COVID-19 is transmitted by aerosol. The fall of the number of infected by Common Flu in 2019-20 was mainly caused by wearing of medical masks, because the droplets were held by medical masks' fabric. Virus particles and aerosol particles are many folds smaller than the pores in the medical mask' fabric. Medical masks can prevent the penetration of bacteria, small droplets, but cannot prevent the penetration of aerosol or viruses. The Middle Ages mask, on the contrary, could deactivate bacteria and viruses in aerosol by adsorption of particles on the charcoal, and the etheric oils from aro-

matic grass could also deactivate and even kill bacteria and viruses. The modern mask has significant resistance to free passage of breathing air, the Middle Ages mask did not. The modern mask has significant problems for asthmatics, patients with angina and all kinds of lung diseases, and in addition displays psychological discomfort. Medical masks do not close tight in many areas on the face and allow free passage of infected air. Because of this in such closed space as on a bus, a train, an airplane the medical mask does not have a significant protection. Only good ventilation can have a protective effect. The inner side of the medical mask fabric is subjected to breathing out humid air. This defect was absent in the Middle Ages mask because the humidity was adsorbed on the charcoal. The humid breath out' air is rich in bacteria and fungi which adsorb on the inside surface of mask and exhibit significant infective danger to the bearer of the mask. The Middle Ages mask did not have this defect. Mandatory Masks played a significant role in the elevation of the COVID-19 infection cases. The Common Flu virus is an antagonist to COVID-19. The fall Common Flu cases was the result of wearing Mandatory Masks. The Common Flu virus could possibly play a role as immune protection against COVID-19, in the same way as antagonist or as vaccination with Smallpox vaccine. The smallpox virus is an antagonist to COVID-19. The WHO' order of mandatory ending of vaccination to Smallpox, possibly provoked the high level of illnesses with COVID-19. The Smallpox virus is an antagonist to SARS-CoV-2. The official nomenclature by the International Committee on Taxonomy of Viruses (ICTV) for COVID-19 virus is SARS-CoV-2. Immunization with Smallpox vaccine protects against COVID-19 family viruses. WHO acted against common sense and highly unprofessionally.

3.3. Gloves as Protection

During the Middle Ages' epidemics, the main infectious agents were *Yersinia pestis*, *Mycobacterium leprae*/*Mycobacterium lepromatosis*, *Salmonella enterica*, the hepatitis B virus (HBV), *Vibrio cholerae* and some others that had abilities to be transferred by direct contacts or contacts with exudates, body liquids, faces, through contact with the surface of contaminated things, fruits, vegetables, and corps. The meaning of wearing protective gloves was to protect humans against infections. It concerned priests, medical staff and men who collected and buried the dead from the streets.

In the absence of real transference of infectious agents by contacts wearing gloves is meaningless. From the very beginning it was known that COVID-19 is not a contact infectious agent. The mandatory wearing gloves was overpowering the society by administration. This was done by administration to drive in slavery and make fools of herds of those citizens who had no power for independent judgment. However, during the COVID-19 pandemic the import of vegetables, fruits, and other goods from heavy infected countries (red countries) was not stopped or prevented. These goods were not disinfected; however, these goods possibly were contaminated with excrements of people infected with

COVID. Virions are present in the excrements of people ill with COVID. If wearing gloves was essential to protect against contact infection, the import of non-disinfected, contaminated goods was harmful to consumers.

3.4. Protection with Glasses

A significant difference in the Middle Ages' protective equipment was made by glasses. The mandatory medical equipment during the COVID-19 pandemic did not include glasses for most of the population, only medical personnel received the protecting screen (at least in Norway). The population was not informed about uselessness of wearing medical masks without protecting eyes. Even if the mucosal surface of the eyes could not be directly affected by COVID-19 virus (this is not studied and not stated), viruses concentrated in tears and by the channel were drained in the nasal cavity and met nasal mucosa which is highly exposed to the viral infection of COVID-19 viruses. The nonsense of mandatory wearing a medical mask without glasses is obvious. On the **Figure 1** there is shown the human' eye with tear draining channels—*canaliculus lacrimalis (inferior)*, and with *saccus lacrimalis*, and *ductus nasolacrimalis*.

4. On the Way to Enslaving the Global Population

Migration in all its appearances is a way to introduction native population to illnesses unknown before (Schlagenhauf-Lawlor, 2008), (Brondz, 2010), (Brondz, 2011).

No one can deny that COVID-19 is a horrible and even deadly for lots of individuals. A great number of facts say that the virus is artificial. It is an enforced version of the strict animal origin virus adopted as humans infection by laboratories manipulations <https://www.youtube.com/watch?v=b08Hi3kBpSs>. However, it's incorrect to blame that on Chinese scientists only.

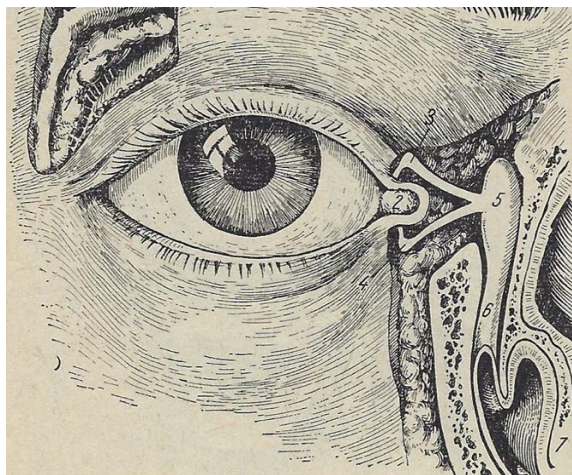


Figure 1. 1 is *glandula lacrimalis*; 2 is *lacus lacrimalis*; 3 is *canaliculus lacrimalis (superior)*; 4 is *canaliculus lacrimalis (inferior)*; 5 is *saccus lacrimalis*; 6 is *ductus nasolacrimalis*, and 7 is *concha nasalis interior*. (Fig. 1. Copied from M. G. Prives, N. K. Lysenkov, V. I. Bushkovich, (Ed. M. G. Prives) 1974, Human Anatomy, Medicine, Moscow, p. 646).

4.1. Pandemic and Lockdown

For the declaration of pandemic in accordance with WHO 10% of Global population should catch an infectious illness. There is minimum 9 billion people on the Globe today, 10% from this number is 900 million. The declared Pandemic had nothing to do with the numbers of the infected and death rates situation on the Globe. Every year more than 1/3 of Earth' population is infected in autumn and in addition 1/3 in spring by Common Flu. The rate of people with preconditions death from Common Flu is higher than from COVID-19. The death rate of patients with preconditions from Common Flu is not published and not presented by the mass media. The death of patients with preconditions from COVID-19 is accounted as death direct from COVID-19, even it was mainly because of precondition' illness. There are many cases when people killed in car accidents were accounted as dead from COVID-19. During the first 12 months of pandemic correct and false numbers of the dead from COVID-19 was about 5 million, which is far below 10% of the population. Every year, and year after year death rate from malaria is above 5 million cases and from tuberculosis is above 5,7 million cases, however, WHO has never declared pandemic in these circumstances. The number of new infection cases by malaria every year is 500 million (Brondz, 2005), (Brondz, 2010), (Brondz, 2011), (Brondz & Brondz, 2012).

4.2. DNA and mRNA-Based Vaccines. COVID-19 Vaccinations Versus Naturally Obtained Immunity

Immunization is a contact of human' organism which reacts to infection' entity. The traditional vaccine does not change genetical information. The vaccination with COVID-19 DNA or mRNA-vaccine are different events contrary to the traditional vaccine. The information about this vaccination event is engraved in the genetical code (in mitochondria) in the future generations. It's a mutation. It's not clear yet if this engravement in genetic code will be a positive mutation or a negative one. It's already known that mRNA from the vaccine goes in nucleus by impairs DNA repair (*in vitro* study but not *in vivo*)

<https://www.youtube.com/watch?v=-SYL-iU0E9Q&t=413s>, this discovery is alarming. Global mandatory vaccinations with DNA and mRNA-based vaccines are a risky enterprise which cannot be allowed without clarification of all short- and long-time adverse effects on human health. Adjuvants facilitate the process of penetration. Possibly the raise of cancer cases among the vaccinated will appear in about from 5 to 10 years in the future.

All vaccines are intended to enhance the production antibodies of S-proteins; however, all manufacturers declare that they do not know the level of antibodies defense titer against COVID-19 given by vaccination. The effectiveness is measured only on the basis of binding of antibodies to viruses. Thus, it is not evident that these vaccines can neutralize pathogen sufficiently. All so called vaccines based on DNA and mRNA technology by definitions of WHO are not vaccines, they are gene therapy. They are capable to change the genome of human.

Since 2019 there has been undergoing a Global medical experiment to test drugs and treatments. These medical experiments are forced by medication actions. Actions like these are declared as crime against humanity by Nuremberg Tribunal in 1946

<https://encyclopedia.ushmm.org/content/en/article/nazi-medical-experiments>,
<https://encyclopedia.ushmm.org/content/en/gallery/medical-experiments?parent=en%2F3000>. The forced medication was declared to be a criminal act by Nuremberg Tribunal in 1946 and this decision was accepted by governments of nearly all nations.

This “vaccination” was a medical act - forced medication of humans. Most humans were in good health and clear mind, and it was made against their will. At the beginning of vaccination none of the vaccines were fully investigated on efficiency, the protocol of injection, side effects in near- and long future, effects of adjuvants in this mixture. All Pharmaceutical companies which provided these vaccines received from their governments the rights to be free from penalties and criminal accusations by trials in case of side effects and even death by using these vaccines. There are many cases of wrong protocols of injection that led to complications and even death

<https://www.youtube.com/watch?v=Nz7wGLPOTxg>,
https://www.youtube.com/watch?v=k5CtAvJ_KCI&t=638s,
<https://www.youtube.com/watch?v=j92lDiWYAPY&t=620s>.

The declaration of appearance of new strains of viruses and reinfection in a short time after vaccination is very suspicious, it implies that the vaccines didn't work, or they are vaccines which have quite different purposes.

Colin Luther Powell, the former United States Secretary of State despite being fully vaccinated (eight times), died from COVID-19 on October 18, 2021, <https://edition.cnn.com/2021/10/18/politics/colin-powell-dies/index.html>. This is the evidence that vaccination cannot save life. Vladimir Volfovich Zhirinovskiy, a Russian right-wing populist, politician, the leader of the Liberal Democratic Party of Russia (LDPR), and a member of State Parliament (DUMA) in the Russian Federation was reported to have died

<https://www.theguardian.com/world/2022/apr/06/russian-far-right-politician-vladimir-zhirinovskiy-dies-at-75> from COVID-19 despite being vaccinated six times.

Vaccine initiates and enhances the production of antibodies to two of S-proteins, this immunity is a short living, it is declared by medical authorities. Medical authorities force people to be revaccinated or so-called booster vaccinated nearly every three months. On the surface of virion of COVID-19 there are twenty to twenty-four S-proteins. Naturally received immunity gives more stable and more prolonged immunity response by the host organism in case of infection <https://www.youtube.com/watch?v=9bamaEMftg4>,

<https://www.youtube.com/watch?v=eabr9uHEDxc>. The other reason against frequent revaccination is the fact that S-proteins are foreign to the host organism

proteins. They initiate the immune response, but its frequent introduction into organism can provoke, in some cases have already provoked such autoimmune response as heart complications/inflammation: pericarditis and myocarditis <https://www.youtube.com/watch?v=7rZZTPp-eYU>, Myocarditis and Pericarditis after mRNA COVID-19 Vaccination | CDC, <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/myocarditis.html>, (Khan et al., 2022) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9419896/>, risk of heart diseases after vaccines <https://www.youtube.com/watch?v=LEBGl8MVE-c>, neuro diseases <https://www.youtube.com/watch?v=LB5oR2gFQEW>, encephalitis <https://www.youtube.com/watch?v=i9JLZuhqRuU>, and others.

Vaccinations are recommended in case of looming infection, to prevent epidemic or in the time after epidemic to prevent its repetition. Epidemiologists do not recommend mass vaccination during the epidemic, because a significant number of people can be asymptotically ill, or already infected, this can trigger their autoimmune response. The correct prophylactic for more than a hundred years was applied in case of Smallpox, however vaccination against COVID-19 was wrongly applied and badly prepared. Under an epidemic the best response can be the use of γ -globulins to enhance the general immune response or medication.

4.3. Green Pass, and the Sign of the Beast

Green Passports were in use before 2019. The example of their early use Italian health pass 1611 equivalent to the Green Passports is presented on **Figure 2**.

The example of an early equivalent to Green or Vaccine Passports from 1611, copy reproduced from Wikipedia, https://en.wikipedia.org/wiki/Immunity_passport.

Since 1969 such documents were issued by WHO under the name “yellow card”, which has been a document for travelers as a proof that they have been

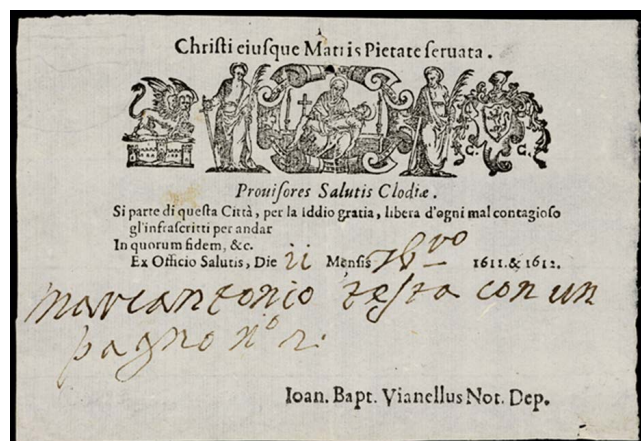


Figure 2. An Italian health pass (*fede di sanità*) for travel during times of plague, 1611.

vaccinated against yellow fever. Usually, it was used for animals as a certificate. Pats Passports were demanded by airlines.

The debate about the use of the Vaccine or Green Passport started already in 1897. Since then up to 2019 the mandatory vaccination was not used as a discriminatory tool, but after 2019 it was used as a discriminatory tool.

In the dark Middle ages people ill with lepromatosis had to wear a mask or hid their face, wore a special handbell to notify others to prevent contacts with uninfected people. This example shows how the infected were isolated from the healthy, however, the mandatory vaccination (which does not prevent infection and illness) directed to segregate healthy vaccinated from healthy unvaccinated and prevent healthy unvaccinated from having a normal life. The mandatory vaccination and Green Passports showed how Canada under the rule of Justin Trudeau slid down from democracy to dictatorship, in some other countries the tendencies were more, or less obvious.

Under Hitler's rule Jews and other prisoners in concentrations camps were marked on the right hand with a number - sign of the *Beast*. The prediction and definition of appearance of Beast was written in the Bible: "*Also it causes all, both small and great, both rich and poor, both free and slave, to be marked on the right hand or the forehead, so that no one can buy or sell unless he has the mark, that is, the name of the beast or the number of its name*" (The Holy Bible, 2001)

<https://www.biblegateway.com/versions/english-standard-version-esv-bible/>.

Mandatory Green Pass and QR-code look like the Signs of the Beast. The situation at end of 2021 and the beginning of 2022 with mandatory introductions of Green Pass and QR-code was: "*all, both small and great, both rich and poor, both free and slave ... no one can buy or sell*", to come to a café, a stadium, a theater, a cinema, a supermarket and elsewhere "*... unless he has the mark, that is, the name of the beast or the number of its name*".

4.4. Looming Repetition

A new strain of coronavirus "Pyrrole" has been recorded in the USA and the UK. The 'highly mutated' COVID variant BA.2.86—known as Pirola also was recorded in Australia

<https://www.abc.net.au/news/2023-09-21/new-covid-strain-variant-pirola-ba-2-86-in-australia-symptoms/102873304>. On September 20, BA.2.86 it was detected via genomic sequencing in 15 countries of Europe, North America, Africa, and Asia.

The new virion has 33 changes in its spike proteins. The first observations of this virus were done at the beginning of the summer 2023. There were detected 36 mutations in comparison to possible predecessor Omicron. "It's also a degree of change you'd normally see over several generations of a virus, rather than in one fell swoop", Kirby Institute virologist Stuart Turville said. Professor Turville also said: "*I call them [variants like BA.2.86] 'parachutes'—they kind of land and*

appear out of the middle of nowhere,”

<https://www.abc.net.au/news/2023-09-21/new-covid-strain-variant-pirola-ba-2-86-in-australia-symptoms/102873304>. In the author’s opinion nothing can appear “out of the middle of nowhere”. It looks like COVID-19 was a product of laboratory manipulation and the new Pirola virus also was a product of further laboratory manipulation with the same aim.

The question: Will the earth population be able to stop it, and to punish the manipulators or will it stay as before a herd of wild beast going to the butchery?

5. Conclusion

WHO exhibited the absence of professional control and responsibility. WHO acted as a tool of manipulations. Based on the above, WHO cannot be anymore the mandatory authority. In 1980 WHO declared Smallpox eradicated. During the 20th century worldwide from 300 to 500 million deaths from Smallpox were recorded

<https://www.bing.com/videos/riverview/relatedvideo?q=%20worldwide%20from%20300%20to%20500%20million%20death%20from%20Smallpox%20was%20recorded%20in%2020th%20century%20&mid=70E56300B67B0471A19470E56300B67B0471A194&ajaxhist=0>.

On the 11th of September 1978 death case from Smallpox was registered in Birmingham, the UK

<https://www.bing.com/videos/riverview/relatedvideo?q=%20worldwide%20from%20300%20to%20500%20million%20death%20from%20Smallpox%20was%20recorded%20in%2020th%20century%20&mid=8D0F33CB89D3A1AB01048D0F33CB89D3A1AB0104&ajaxhist=0>.

A number of smallpox cases were recorded globally between 1920 and 1980 <https://www.statista.com/statistics/1108306/smallpox-number-of-cases-worldwide-historical/>. It is impossible that biological species can disappear in a period of two to three years, which can cause the deadly case in 1978 and disappear already in 1980, it is a professional nonsense.

Because the virus of smallpox is an antagonist to COVID 19, vaccination with smallpox vaccine could give some protection against COVID 19.

However, secret biological/virological experiments by accident or intentionally “let the cat out of the bag”.

Most countries’ authorities and WHO could not predict or be aware of the real danger.

The pharmaceutical industry looked at the situation as a potential possibility to gain extra high profits.

The mass media presented fabulous frightening stories to attract attention. All this resulted in hysteria and fundamental violation of the rights of the population. It is important not to allow the repetition of this madness to happen again.

The genetical manipulation of the Earth population by using DNA and mRNA-based vaccines should not be allowed. In the future twenty-fifty years

experts must monitor the level of increase in general death <https://www.youtube.com/watch?v=iyo2UNQcdpQ>, increase in cases of cancer and decrease fecundity in developed countries, because the use of vaccination with DNA and mRNA-based “Vaccines” without doubt has influenced these parameters. Only after one generation it will be clear if the COVID-19 was a simple foulness, or it was an attempt to change ethnical and demographic composition of the Global population.

Conflicts of Interest

The author declares no conflicts of interest regarding the publication of this paper.

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