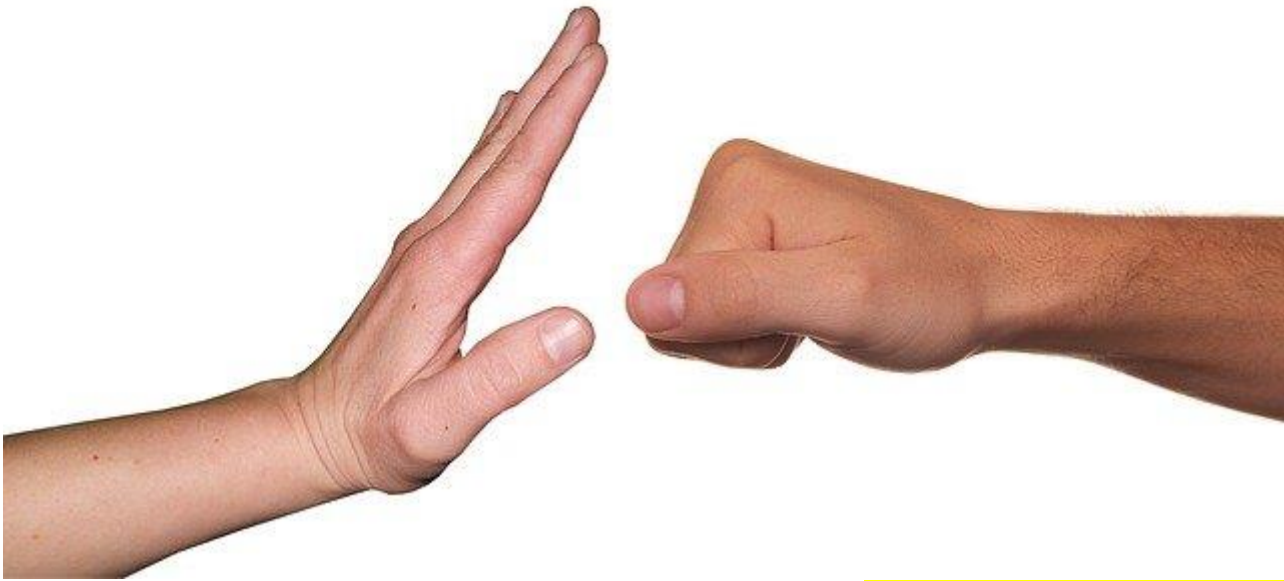


30 Facts You Need to Know: Your Covid Cheat Sheet - Kit Knightly



You asked for it, so we made it. A collection of all the arguments you'll ever need.

Source: [30factsyouNEEDtoknow:YourCovidCribsheet-OffGuardian](#)

We get a lot of emails and private messages like, "Do you have a source for X?" or "Can you point me to mask studies?" or "I know I saw a graph on mortality, but I can't find it anymore." And we understand that it's been a long 18 months, and there are so many statistics and numbers to keep in mind.

To accommodate all of these requests, we decided to create a list with bullet points and source information for all of the important points. A one-stop shop.

Here are the key facts and sources about the alleged "pandemic" that will help you understand what has happened to the world since January 2020, as well as help enlighten any of your friends who may still be caught in the fog of the "New Normal."

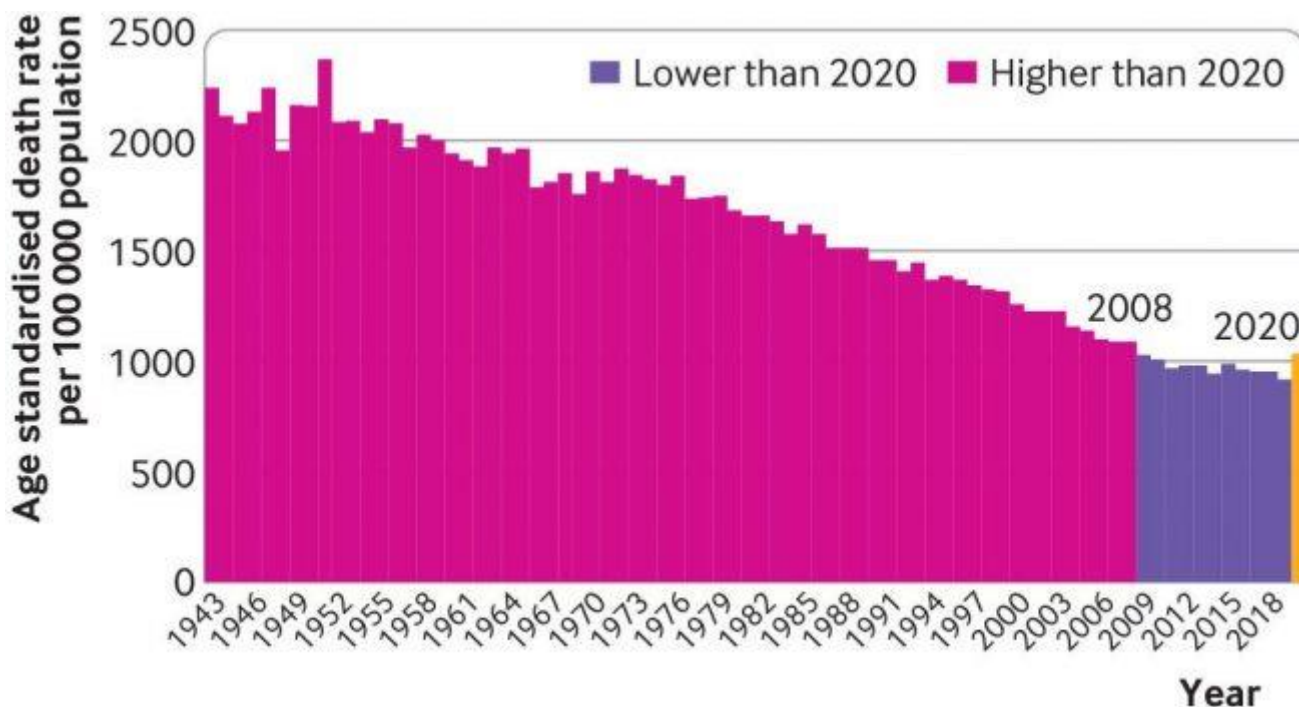
Part I: "Covid deaths" and mortality

1. the survival rate of "Covid" is over 99%. From the beginning of the pandemic, the government's medical experts have emphasized that *Covid poses no danger to the vast majority of the population.*



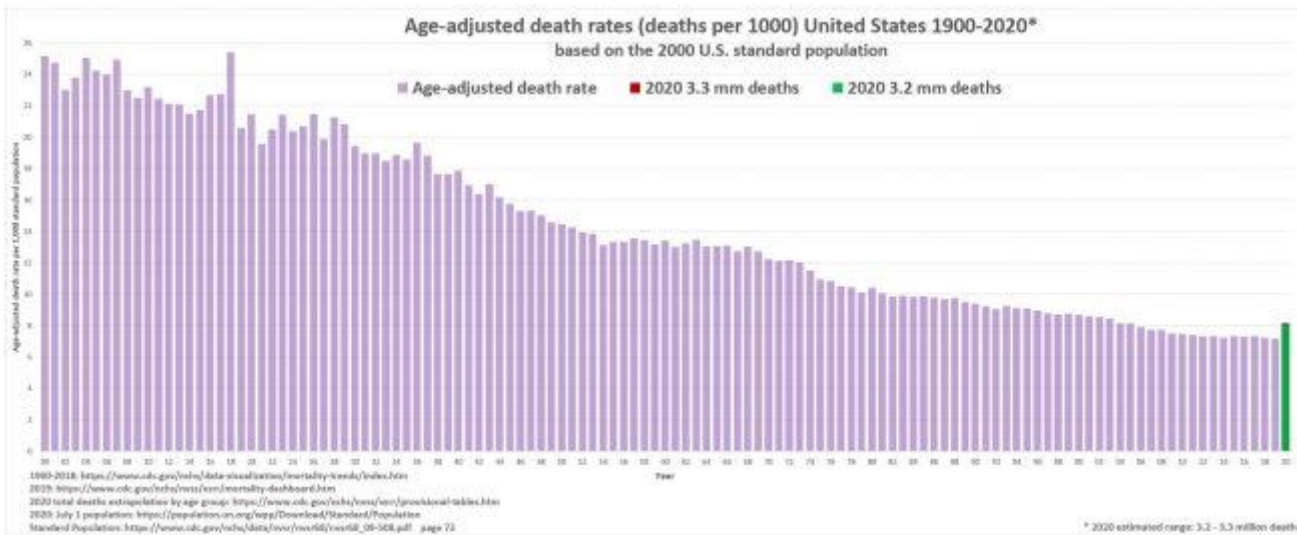
Almost all studies on the infectious mortality rate (IFR) of Covid have [produced results between 0.04% and 0.5%](#). This means that the survival rate of Covid is at least 99.5%.

2. there has been NO unusual excess mortality. The press described 2020 as the "deadliest year in the UK since the Second World War", but that is misleading because it ignores the massive increase in population since then. A more reasonable statistical measure of mortality is the age-standardised mortality rate (ASMR):



By those standards, 2020 isn't even the worst year for mortality since 2000. In fact, *only 9 years since 1943 have been better than 2020.*

Even in the US, the ASMR for 2020 is only at the 2004 level:



A detailed breakdown of the impact of Covid on mortality in Western Europe and the US can be found [here](#). The observed increase in mortality could be due to causes other than Covid [Facts 7, 9 & 19].

3. the number of "Covid deaths" is artificially inflated. Countries around the globe have defined a "Covid death" as "*death from any cause within 28/30/60 days of a positive test*".

Health officials from Italy, Germany, the United Kingdom, the United States, Northern Ireland and other countries [have admitted to this practice](#):



Eliminating any distinction between death by covid and death by something else after a positive covid test naturally leads to an overcount of "covid deaths." British pathologist Dr. John Lee warned of this "[significant overestimation](#)" last spring. [Other mainstream sources](#) have reported on [it as](#) well.

Given the high percentage of "asymptomatic" covid infections [14], the known prevalence of serious comorbidities [Fact 4], and the potential for false-positive tests [Fact 18], this makes covid death rates a highly unreliable statistic.

4. the vast majority of covid deaths have serious comorbidities. In March 2020, the Italian government published statistics showing that 99.2% of their "covid deaths" [had at least one serious comorbidity](#).

These included cancer, heart disease, dementia, Alzheimer's disease, kidney failure and diabetes (among others). Over 50% of them had **three or more** serious pre-existing conditions.

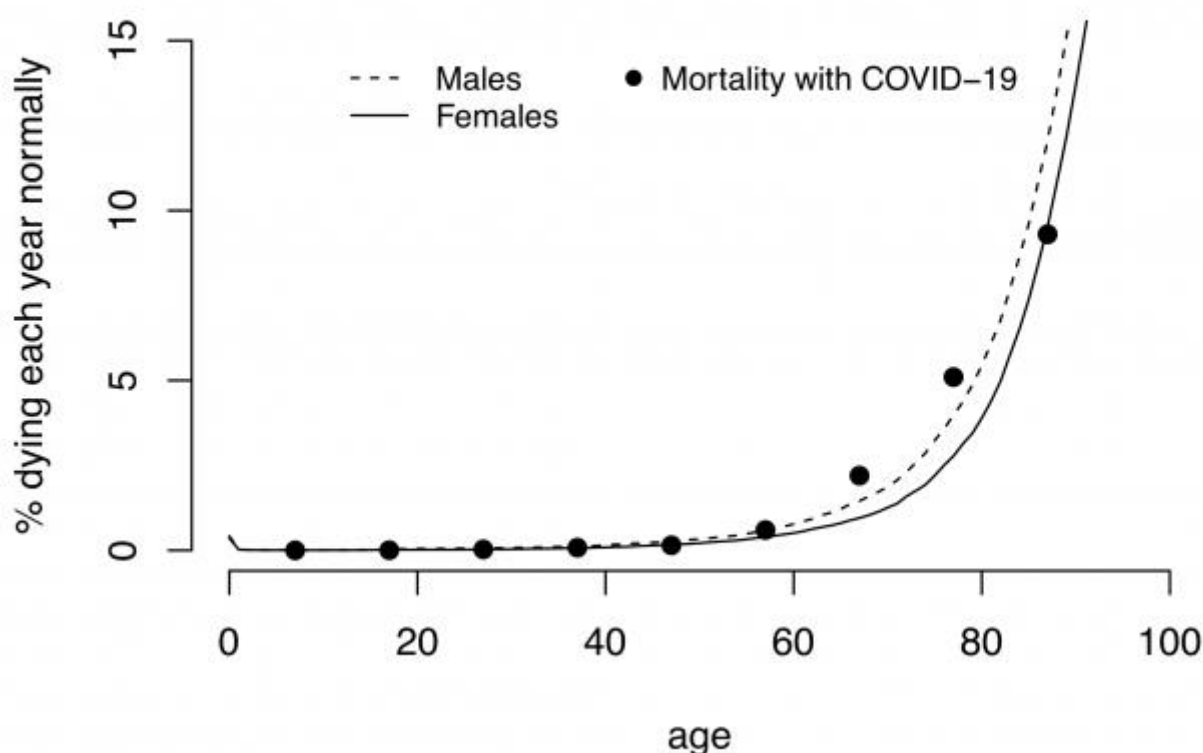
This pattern has been confirmed in all other countries as the 'pandemic' has progressed. A FOIA request to the UK ONS in October 2020 found that [less than 10% of official 'covid deaths' at that time had covid as the sole cause of death](#).

5. the average age of covid death is higher than the average life expectancy. The average age for a "covid death" in the UK is [82.5 years](#). In Italy, it is 86. Germany, 83. In Switzerland, 86. Canada, 86. USA: 78, Australia: 82.

In almost all cases, the [average age at a "covid death" is](#) higher than the national life expectancy.

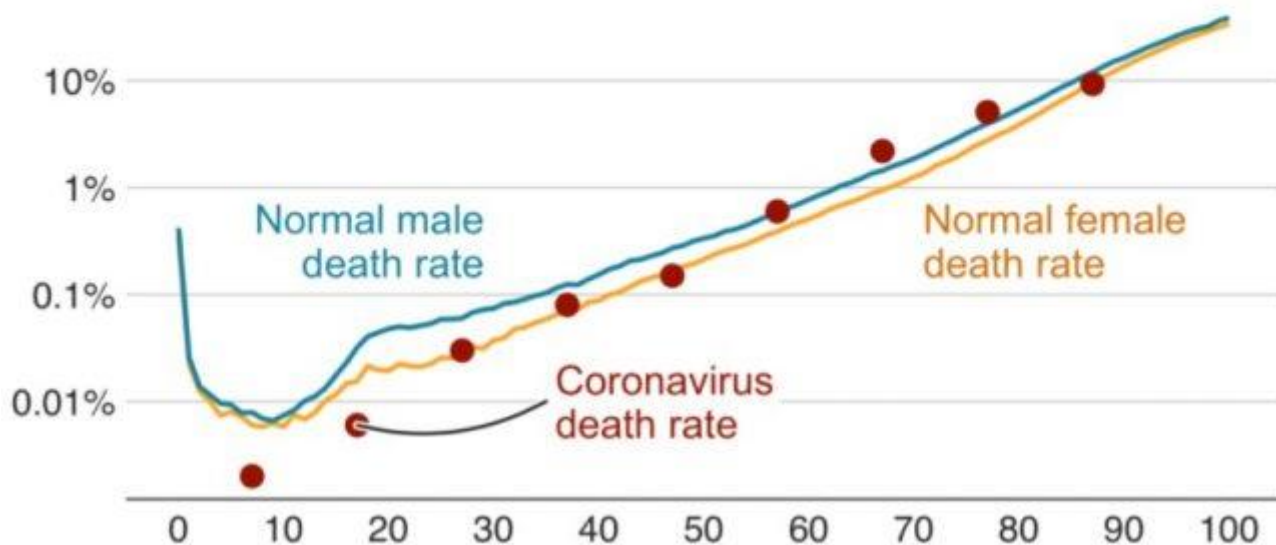
So for most of the world, the "pandemic" had little to no impact on life expectancy. By comparison, during the Spanish flu, life expectancy in the U.S. dropped 28% in just over a year. [\[Source\]](#)

6. the Covid mortality curve closely mirrors the natural mortality curve. [Statistical studies](#) from the UK [and India](#) have shown that the Covid mortality curve follows the expected mortality curve almost exactly:



Chances of dying from coronavirus v normal annual risk

Risk of dying each year by age (GB)



[The](#) risk of dying "from covid" is [almost exactly the same as the general risk of dying](#).

The small increase for some of the older age groups may be explained by other factors. [Facts 7, 9 & 19]

7. there has been a massive increase in the use of "unlawful" living wills.

Surveillance agencies and government agencies have reported a massive increase in the use of Do Not Resuscitate Orders (DNRs) over the past twenty months." ["Do Not Resuscitate," translator's note.]

[In the US](#), hospitals have considered ["universal living wills"](#) for any patient who tested positive for Covid, and nurses decrying abuses have [admitted that the living will system in New York has been abused](#).

In the UK, there was an ['unprecedented' rise in 'illegal' DNR advance directives](#) for disabled people, GP surgeries sent letters to non-terminated patients advising them to sign such advance directives, while other doctors **signed** ['blanket DNRs'](#) for **entire care homes**.

A [study by the University of Sheffield found](#) that more than a third of all 'suspected' covid patients had a DNR added to their file within 24 hours of hospital admission.

The blanket use of forced or illegal DNR orders could be responsible for the increase in mortality in 2020/21. [Facts 2 & 6]

Part II: Lockdowns

8. lockdowns do not prevent the spread of disease. There is little to no evidence that lockdowns have any impact on limiting "covid deaths". Comparing regions where lockdowns have been implemented with those where they have [not](#), no pattern emerges.

New deaths attributed to Covid-19 in Florida and California

Seven-day rolling average of new deaths (per 100k)



Source: Financial Times analysis of data from the Covid Tracking Project.
Date updated: January 25 2021 2:05pm GMT. Interactive version: [ft.com/covid19](#)

FINANCIAL TIMES

New deaths attributed to Covid-19 in United Kingdom and Sweden

Seven-day rolling average of new deaths (per 100k)



Source: Financial Times analysis of data from the Johns Hopkins CSSE, the Covid Tracking Project, the World Health Organization, the UK Government coronavirus dashboard and the Swedish Public Health Agency.
Date updated: February 17 2021 7:02pm GMT. Interactive version: [ft.com/covid19](#)

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9. lockdowns kill people. There is strong evidence that lockdowns - through social, economic, and other public health harms - are [more deadly than the "virus"](#).

Dr. David Nabarro, World Health Organization special representative for Covid-19, called lockdowns a "global disaster" in October 2020:

We in the World Health Organization do not advocate lockdowns as a primary means of combating the virus [...] it appears that we could have a doubling of global poverty by next year. Child malnutrition could at least double [...] This is a terrible, terrible global catastrophe.

An April 2020 UN report warns of [100,000 children being](#) killed by the economic impact of lockdowns, while [tens of millions more are](#) at risk of poverty and hunger.

[Unemployment](#), poverty, [suicide](#), alcoholism, drug use and other social and mental health crises are increasing worldwide. Missed and [postponed surgeries](#) and [screenings](#) will lead to increased mortality due to heart disease, cancer, etc. in the near future.

The impact of lockdowns would explain the small increase in excess mortality [Facts 2 & 6].

10. hospitals have never been unusually overburdened. The main argument in defense of lockdowns is that "flattening the curve" would prevent a rapid influx of cases and keep health systems from collapsing. But most health systems have never been on the verge of collapse.

In March 2020, it was reported that hospitals in Spain and Italy were overcrowded with patients, but that happens every flu season. In 2017, Spanish hospitals were at [200% capacity](#), and in 2015, [patients were sleeping in the hallways](#). A March 2020 JAMA article noted that Italian hospitals ["are typically 85-90% full during the winter months."](#)

In the UK, the NHS [National Health Service, translator's note] is [regularly stretched to capacity in the winter](#).

As part of its Covid policy, [the NHS announced in spring 2020](#) that it *would* "reorganise hospital capacity to treat Covid patients and non-Covid patients separately" and that "as a result, hospitals will face capacity pressures with lower overall occupancy rates than would previously have been the case".

This means that **thousands of beds have been cut**. During what was supposed to be a deadly pandemic, maximum hospital occupancy was reduced. Despite this, the NHS never came under pressure beyond a typical flu season, and at times had as many as [four times more empty beds than normal](#).

In both the UK and the US, millions were spent on [temporary emergency hospitals](#) that [were never used](#).

Part III: PCR tests

11. PCR tests were not developed for the diagnosis of disease. The reverse transcriptase polymerase chain reaction (RT-PCR) test is referred to in the media as the "gold standard" for covid diagnosis. However, the Nobel Prize-winning inventor of the method never intended to use it as a diagnostic tool and has [stated this publicly](#):

PCR is just a process to make a whole lot out of anything. It doesn't tell you that you're sick or that what you end up with is going to hurt you or anything like that.

12. PCR tests have long been known to be inaccurate and unreliable. The "gold standard" PCR tests for Covid are known to give many false-positive results because they react to DNA material that is not specific for Sars-Cov-2.

In a Chinese study, it was found that the same patient [could get two different results on the same day with the same test](#). In Germany, the [tests are](#) known to have reacted to [cold viruses](#). A 2006 study found that [PCR tests for one virus also reacted to other viruses](#). In 2007, the reliance on PCR tests led to an "outbreak" of whooping cough that [never actually existed](#). Some tests in the US [even reacted to the negative control sample](#).

The [late President of Tanzania](#), John Magufuli, submitted samples of goat, papaya and motor oil for PCR testing, [all of which were positive for the virus](#).

As early as February 2020, experts admitted that the test was unreliable. Dr Wang Cheng, president of the Chinese Academy of Medical Sciences, told Chinese state television: "*The accuracy of the tests is only 30-50%*". The [Australian government website states](#), "*There is limited evidence to assess the accuracy and clinical utility of the available COVID-19 tests.*" And [a Portuguese court ruled that PCR tests were "unreliable"](#) and should not be used for diagnosis.

You can read detailed breakdowns of the shortcomings of PCR tests [here](#), [here](#), and [here](#).

The CT values of the PCR tests are too high. PCR tests are performed in cycles. The number of cycles used to get a result is called the "cycle threshold" or CT value. [Kary Mullissaid](#), "*If you have to do more than 40 cycles [...] there is something wrong with your PCR.*"

[MIQE's PCR guidelines](#) agree, stating, "*[CT] values above 40 are suspect because they indicate low efficiency, and generally should not be reported,*" and Dr. Fauci himself [admitted that anything above 35 cycles is almost never culturable](#).

Dr. Juliet Morrison, a virologist at the University of California, Riverside, [told the New York Times](#), "*Any test with a threshold above 35 cycles is too sensitive ... I'm shocked that people think 40 [cycles] could represent a positive result ... A more reasonable threshold would be 30 to 35*".

In the same article, Dr. Michael Mina of the Harvard School of Public Health says the threshold should be 30, and the author points out that lowering the CT from 40 to 30 **would have reduced "covid cases" by as much as 90%** in some states.

The [CDC's own data](#) suggest that no sample can be cultured for more than 33 cycles, and Germany's Robert Koch Institute says that [probably nothing over 30 cycles is infectious](#).

Nevertheless, it is known that almost all laboratories in the USA perform their tests with [at least 37 and sometimes even 45 cycles](#). The [NHS "standard operating procedure" for PCR testing](#) sets the limit at 40 cycles.

From what we know about CT values, most PCR test results are questionable at best.

14. The World Health Organization has admitted (twice) that PCR tests produce false-positive results. In December 2020, WHO published a [briefing memo on the PCR process](#), instructing laboratories to be wary of high CT values leading to false positives:

If the samples have a high Ct value, it means that many cycles were required to detect the virus. In certain circumstances, it is difficult to distinguish between background noise and the actual presence of the target virus.

[Then, in](#) January 2021, [WHO](#) issued [another memo](#) warning that "asymptomatic" positive PCR tests should be retested because they could be false positives:

If the test results are not consistent with the clinical picture, a new sample should be collected and retested using the same or a different NAT technology.

15. The scientific basis for Covid testing is questionable. The genome of the Sars Cov-2 virus was reportedly sequenced by Chinese scientists in December 2019 and published on January 10, 2020. Less than two weeks later, German virologists (Christian Drosten et al.) had reportedly used the genome to develop assays for PCR testing.

They wrote a paper titled ["Detection of 2019 novel coronavirus \(2019-nCoV\) by real-time RT-PCR"](#) that was submitted for publication on January 21, 2020 and accepted on January 22. This means that the paper **was reportedly "peer reviewed" in less than 24 hours**. A process that normally takes weeks.

Since then, a consortium of more than forty bioscientists has petitioned for the paper's retraction and written a lengthy report [listing ten major flaws in the paper's methodology](#).

They have also demanded the release of the journal's peer review report to prove that the paper has indeed gone through the peer review process. The journal has not yet complied with this request.

The Corman-Drosten tests are the basis of all Covid PCR tests in the world. If the work is questionable, so is every PCR test.

Part IV: "Asymptomatic Infection"

The **majority of Covid infections are "asymptomatic"**. As early as March 2020, studies from Italy indicated that [50-75% of positive Covid tests were asymptomatic](#). Another UK study from August 2020 found that [86% of "Covid patients" had no viral symptoms at all](#).

It is literally impossible to tell the difference between an "asymptomatic case" and a false positive test result.

17. there is very little evidence to support the alleged risk of 'asymptomatic transmission'. In June 2020, [Dr Maria Van Kerkhove](#), head of WHO's Department of Emerging Diseases and Zoonoses, said:

Based on the data we have, it still seems rare for an asymptomatic person to actually transmit to a secondary person.

A meta-analysis of Covid studies published in the December 2020 Journal of the American Medical Association (JAMA) found that asymptomatic carriers [have less than a 1% chance of infecting people in their household](#). Another study, [conducted in 2009 on influenza](#), found that there were only

... limited evidence of the importance of [asymptomatic] transmission [exists]. The role of asymptomatic or pre-symptomatic influenza infected persons in disease transmission may have been overestimated ...

Given the known shortcomings of PCR testing, many "asymptomatic cases" may be false positives (Fact 14).

Part V: Ventilators

18. ventilation is NOT a treatment for respiratory viruses. Mechanical ventilation is not and never has been a recommended treatment for respiratory infections of any kind. In the early days of the pandemic, many doctors spoke out and questioned the use of ventilators to treat "covid".

Dr Matt Strauss wrote in The Spectator magazine:

Ventilators cannot cure diseases. They can fill your lungs with air when you are no longer able to do so yourself. In the public's mind, they are associated with lung disease, but that is actually not their most common or useful application.

German pulmonologist Dr Thomas Voshaar, chairman of the Association of Pneumatology Clinics, [said](#):

When we read the first studies and reports from China and Italy, we immediately wondered why intubation was so common there. ***This contradicted our clinical experience with viral pneumonia.***

Despite this, the [WHO](#), [CDC](#), [ECDC](#) and [NHS](#) "recommended" that covid patients be ventilated rather than using non-invasive methods.

This was **not a medical strategy aimed at giving patients the best possible treatment**, but rather at reducing the hypothetical spread of covid by preventing patients from exhaling aerosol droplets.

19. Ventilators have killed people. For someone suffering from the flu, pneumonia, chronic obstructive pulmonary disease, or any other condition that restricts breathing or affects the lungs, a ventilator will not relieve any of these symptoms. On the contrary, it will almost certainly worsen them and even kill many of the patients.

Intubation tubes are a potential source of an infection known as "ventilator-associated pneumonia". Studies show that it affects [up to 28% of all people connected to a ventilator and kills 20-55% of those infected.](#)

Mechanical ventilation also damages the physical structure of the lungs, resulting in "[ventilator-induced lung injury](#)" that can drastically affect quality of life and even lead to death.

Experts estimate that [40-50% of ventilated patients die, regardless of their disease.](#) Worldwide, [between 66 and 86 % of all "covid patients" who were](#) connected to a ventilator died.

According to the "Undercover Nurse," the ventilators in New York were used so improperly that they destroyed patients' lungs:



<https://youtu.be/UIDsKdeFOmQ>

This policy was negligent at best and possibly premeditated murder at worst. This misuse of ventilators may be responsible for the increase in mortality in 2020/21 [Facts 2 & 6].

Part VI: Masks

20. Masks don't work. At least a dozen scientific studies have shown that masks do not prevent the spread of respiratory viruses.

A [meta-analysis published](#) by the CDC [in May 2020 found](#) that *"the use of face masks does not significantly reduce influenza virus transmission."*

[Another study of](#) over 8000 subjects found that masks *"do not appear to be effective against either laboratory-confirmed viral respiratory infections or clinical respiratory infections."*

There are literally too many to quote them all, but you can read:

[\[1\]\[2\]\[3\]\[4\]\[5\]\[6\]\[7\]\[8\]\[9\]\[10\]](#) Or [read](#) a summary of SPR [here](#).

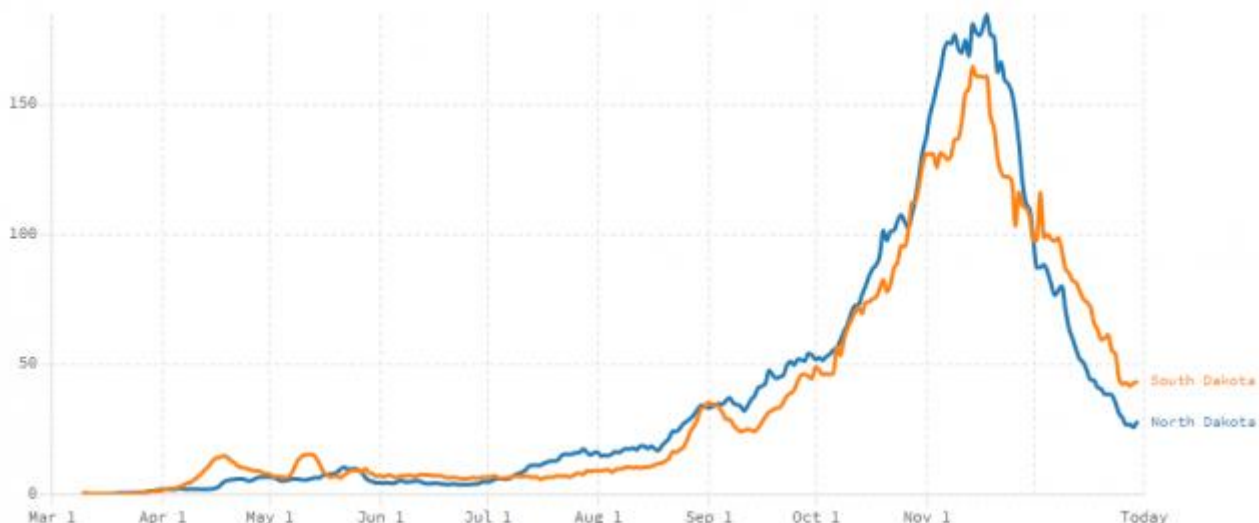
While a few studies have been done to prove that masks work for Covid, they are all seriously flawed. One relied [on self-reporting as data](#). Another was so poorly designed that [an expert panel called for it to be withdrawn](#). A third was withdrawn after its predictions were shown to be [completely wrong](#).

WHO commissioned its own meta-analysis in the Lancet, but it looked only at N95 masks and only in hospitals." [For a detailed account of the poor data in this study click [here](#)].

Apart from the scientific evidence, there is also ample evidence from the field that masks do not stop the spread of disease.

For example, North Dakota and South Dakota had [nearly identical numbers of cases](#), even though one state has a mask requirement and the other does not:

CASES PER 100K POPULATION IN NORTH DAKOTA AND SOUTH DAKOTA



In Kansas, there were even [fewercovid"cases" in](#) counties without mandatory masks than in counties with mandatory masks. And although masks are very common in Japan, that country had its [worst flu outbreak in decades in 2019](#).

21. masks are bad for your health. Wearing a mask for long periods of time, wearing the same mask multiple times, and other aspects of cloth masks can have a negative impact on your health. A long study on the harmful effects of mask wearing was recently published in the [International Journal of Environmental Research and Public Health](#).

Dr. James Meehan [reported in August 2020](#) that he noticed an increase in bacterial pneumonia, fungal infections, and facial rashes.

Masks are also known to contain [plastic microfibers](#) that damage the lungs when inhaled and may be carcinogenic.

Wearing masks in children encourages mouth breathing, [which leads to facial deformities](#).

All over the world, people have [fainted](#) while wearing their masks [due to CO2 poisoning](#), and [some children in China even suffered sudden cardiac arrest](#).

22. masks are bad for the planet. [Millions of disposable masks have been consumed](#) every month for over a year. According to a United Nations report, plastic waste is [likely to more than double in the next few years](#) due to the Covid19 pandemic, and most of that is face masks.

The report goes on to warn that these masks (and other medical waste) will clog sewage and irrigation systems, which in turn will impact public health, irrigation and agriculture.

A study by [Swansea University](#) has found that heavy metals and plastic fibres are released when disposable masks are submerged in water. These materials are toxic to both humans and wildlife.

Part VII: Vaccines

23 Covid "vaccines" are an absolute novelty. Prior to 2020, [no successful vaccine had ever been developed against a human coronavirus](#). Since then, we have *reportedly produced 20 of them in 18 months*.

Scientists have tried for years to develop a vaccine against SARS and MERS - without success. Some of [the failed SARS vaccines even caused hypersensitivity to the SARS virus](#). This means that vaccinated mice could potentially become more severely ill than unvaccinated mice. Another trial [caused liver damage in ferrets](#).

While conventional vaccines work by exposing the body to a weakened strain of the microorganism that causes the disease, these new Covid vaccines are [mRNA vaccines.- Impfstoffe](#)

mRNA (messenger ribonucleic acid) vaccines work, in theory, by injecting viral mRNA into the body, where it replicates in cells and stimulates the body to recognise the virus's 'spike proteins' and form antigens for them. They have been [researched since the 1990s](#), but no mRNA vaccine has been approved for use before 2020.

24. vaccines do not confer immunity and do not prevent transmission. It is undisputed that Covid "vaccines" do **not confer** immunity to infection and do **not** prevent one from transmitting the disease to others. In fact, an [article in the British Medical Journal](#) highlighted that the vaccine trials were not even designed to test whether the "vaccines" limit transmission.

The vaccine manufacturers themselves, in releasing the untested mRNA gene therapies, have made it clear that the "efficacy" of their product is based on ["reducing the severity of symptoms."](#)

25. vaccines have been hastily developed and have unknown long-term effects. Vaccine development is a slow, painstaking process. It usually takes [many years for](#) a vaccine to be developed, tested, and finally approved for public use. The various vaccines for Covid were all developed and approved in less than a year. Clearly, there can be no long-term safety data on chemicals that are less than a year old.

Pfizer even admits in the [leaked supply contract](#) between the pharmaceutical giant and the Albanian government that

the long-term effects and efficacy of the vaccine are currently unknown and that there may be adverse effects of the vaccine that are currently unknown.

In addition, [none of the vaccines](#) have been [properly tested](#). Many of them skipped the early trials entirely, and the late-stage human trials have either not been peer-reviewed, have not published their data, [will not be completed before 2023](#), or have been discontinued [after "serious adverse effects"](#).

26. vaccine manufacturers have been granted immunity from suit if they cause harm. The US Public Readiness and Emergency Preparedness Act (PREP) [grants immunity until at least 2024](#).

The EU's product authorisation law [provides for the same](#), and there are reports of [confidential liability clauses in the contracts](#) the EU has with vaccine manufacturers.

The United Kingdom went even further and [granted a permanent indemnity to the government and its employees for damages](#) incurred when a patient is treated for Covid-19 or "suspected Covid-19".

Again, the leaked Albanian contract suggests that at least Pfizer has made this freedom from liability a standard requirement for the supply of Covid vaccines:

Buyer hereby agrees to indemnify, defend and hold harmless Pfizer [...] from and against any and all actions, claims, demands, losses, damages, liabilities, settlements, penalties, fines, costs and expenses.

Part VIII: Deception and Prior Knowledge

27. The EU prepared "vaccination passports" at least one year before the start of the pandemic. Proposed COVID countermeasures, presented to the public as improvised emergency measures, were in place [before the outbreak](#).

Two EU documents published in 2018, ["2018 State of Vaccine Confidence"](#) and a technical report entitled ["Designing and implementing an immunisation information system"](#), discussed the plausibility of an EU-wide immunisation surveillance system.

These documents were summarized in the 2019 Vaccination Roadmap, which (among other things) calls for a "feasibility study" on vaccination passports to begin in 2019 and be completed in 2021:

ROADMAP FOR THE IMPLEMENTATION OF ACTIONS BY THE EUROPEAN COMMISSION BASED ON THE COMMUNICATION AND THE COUNCIL RECOMMENDATION ON STRENGTHENING COOPERATION AGAINST PREVENTABLE DISEASES

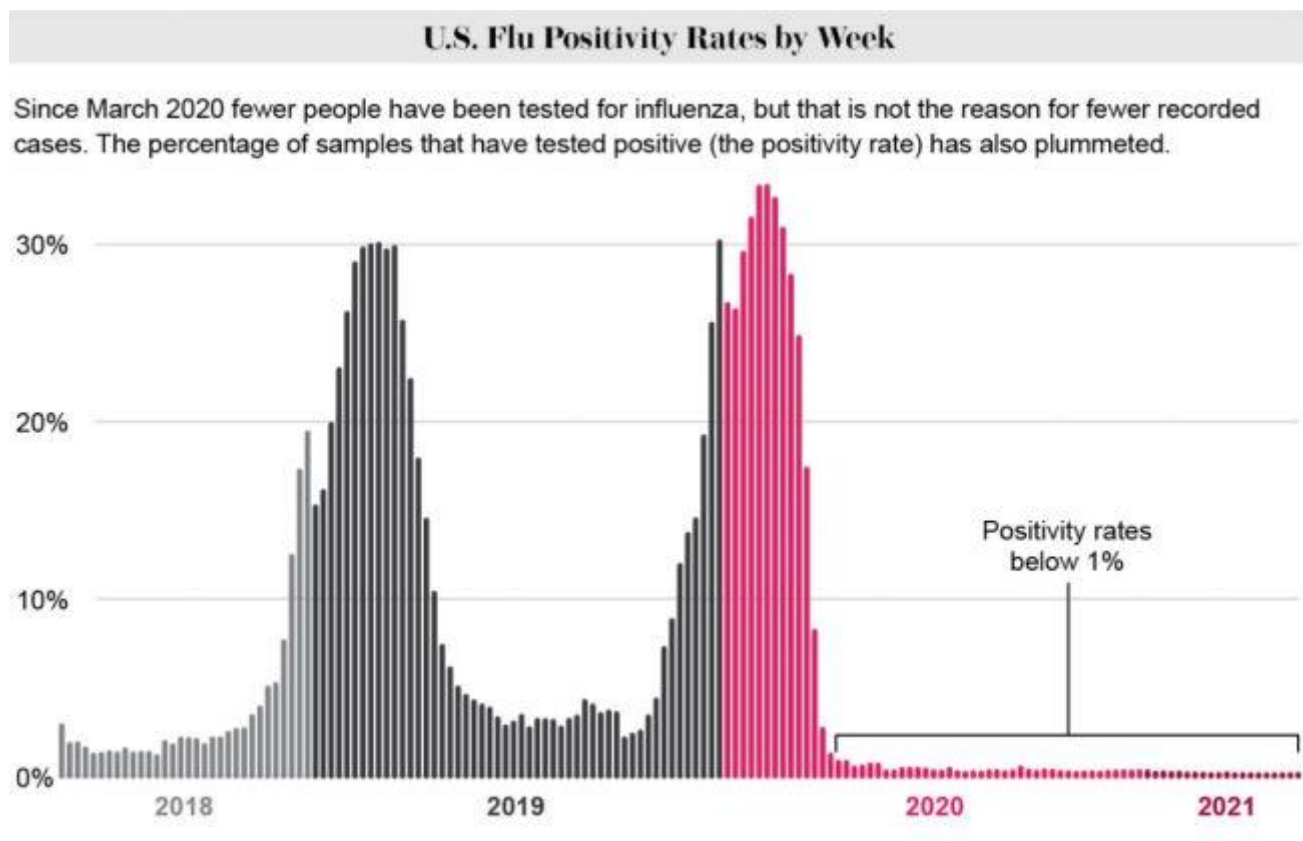


The [final conclusions of this report](#) were released to the public in September 2019, just one month before "Event 201" (see below).

28. a "training exercise" predicted the pandemic just weeks before its outbreak. In October 2019, the [World Economic Forum and Johns Hopkins University](#) hosted "[Event 201](#)." This was an exercise that assumed that a zoonotic coronavirus would cause a global pandemic. The exercise was sponsored by the Bill and Melinda Gates Foundation and the GAVI Vaccine Alliance.

The findings and recommendations of the exercise were published in November 2019 as a "[Call to Action](#)". One month later, the first case of "Covid" was reported in China.

29. Since the beginning of 2020, the flu has "disappeared". In the United States, flu cases have [reportedly dropped by over 98%](#) since February 2020.



Not only in the USA, but also worldwide the flu has apparently [almost completely disappeared](#).

Meanwhile, a new disease called "Covid," which has the same symptoms and a similar mortality rate as the flu, is said to be sweeping the globe.

30. The elite have made a fortune from the pandemic. Since the lockdowns began, the richest people have become significantly richer. "Forbes" reports that 40 new billionaires have emerged "[in the fight against the coronavirus](#)", [including 9 vaccine manufacturers](#).

"Business Insider" reports that "[the net worth of billionaires has increased by half a trillion dollars by October 2020](#)."

That number will clearly be even larger now.

These are the most important facts of the pandemic, presented here as a tool for formulating and supporting your arguments to friends or strangers. We thank all the researchers who have compiled this information over the last twenty months, especially [SwissPolicyResearch](#).

Tags: ventilators, BillandMelinda Gates Foundation, Covid-19, Event 201, GAVI The Vaccine Alliance, hospitalization rates, vaccines, vaccinations, masks, plandemia, mortality, World Economic Forum

Source : <https://axelkra.us/30-fakten-die-sie-wissen-muessen-ihr-covid-spickzettel-kit-knightly/>
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