

Dr. Mike Yeadon Speaking -Transcription on 7/20/21

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Introduction

Hi, my name is Dr. Mike Yeadon. I'm a qualified life science researcher, really, I have a first degree in biochemistry in toxicology, and have a research based PhD in respiratory pharmacology. And now I've worked for 32 years, mostly in big pharmaceutical companies, and 10 years in the biotechnology sector. So my last job in Big Pharma, I was the Vice President and Chief Scientist of allergy and respiratory research. I left Pfizer in 2011 and then after that I founded, grew and sold a biotech company called Ziarco, to Novartis that was 2017. And so before that, and afterwards, an independent advisor to over 30 startup biotechnology companies. So you would expect from that, that I am pro new medicines of all kinds, our goals always were to address unmet medical needs and to do so with acceptable safety given the medical context. And I'm in favor of all modes of new medical treatments, whether they're biologicals or vaccines, small molecules, creams, sprays, ointment, whatever. But I'm fervently against unsafe medicines or medicines used in an inappropriate context, and so some of the things I'm going to say are not favorable to the current crop of gene-based vaccines.

And it's for that reason that they're being inappropriately used, and I don't think they have a sufficient safety profile to be used as a sort of wide spectrum, public health prophylactic. As a result of that background in pharmaceutical industry, in biotechnology, I am pro new medical entities that treat unmet needs and do so safely. And that's true whether the entity is a vaccine or a biological, like an antibody, or if it's what I would call a small molecule, therapeutic, a pill or tablet, but I'm anti unsafe medicines, regardless of what format they are. And so my criticisms sometimes fall on to unsafe small molecule substances and sometimes on unsafe vaccines. So I'm generally pro new medicines as long as they are safe and effective and used appropriately. And I'm anti the opposite of those things.

A few things have allowed me, I think, to spot what's going on in the world at the moment, I do have, I would say two big advances. One, I've loved biology since I was little. And this year marks the 40th year I've been studying, look continuing to learn and to apply biology broadly, whether it's pharmacology, biochemistry, molecular biology, toxicology. And so I've got a very broad grounding in all things to do with life science in terms of health and disease. But one of my former supervisors said that I had a remarkable facility that stood out above the ordinary things you'd have to do to be a vice president or CEO. And he said that I was able to spot patterns in sparse data earlier than my peers did. So when there was not enough data for most people to judge what was going on, I would often be able to see it, I could see a pattern forming when there wasn't quite enough information. And really, I guess I was running a lot of simulations in my head and trying to work out „what could these small bits of information mean?“ rather than waiting for more data, it's my word, I think

I know what's happening here. And that would sometimes be applied to say target selection in industry, or how we should prosecute a program or what the competition was doing. But on this occasion, it allowed me quite quickly to work out that what we what we were being told about this virus, and what we needed to do in order to stay safe was simply not true.

Attribution of deaths

For example, early on in the UK, there were enormous changes made in attribution of causes of death. So we've never had anything as absurd as the rule that is now used. So if you should die within 28 days of having a positive result in a, you know, an inappropriate test using molecular biology, then you would be declared to have died of COVID-19. That's just wrong. It's not just a matter of disagreeing professionally, it's just complete nonsense. And we can certainly talk about the unreliability and trustworthy nature of PCR Testing.

Lockdown

But also, things like lockdown. I mean, just the whole phrase of it, the fact that it was completely unprecedented. And that we basically were to minimize contact one with another. And that that was going to save us. I knew quite early on that that was rubbish.

And the reason is simple, that only people who are ill and have symptoms are really strong infectious risks to other people. And those people are not people who are walking around in the community, because if you're full of virus, and symptomatic, you are also ill, and ill people tend to stay at home or in bed and or if they're very serious, they end up in hospital die. And so the idea that if you kept normal contacts at work, and, you know, just civic society, in your normal economy, that that would slow epidemic spreading, I was fairly sure fairly early on that that was bunk. Unfortunately, it took several months before that was clear. by which time the idea that locked down is what you need to do had been pretty much cemented it most of most of the world. So basically, everything your government has told you about this virus, everything you need to do to stay safe is a lie. Every every part of it and I'll be challenged on that.

Literally, there are no, none of the key themes that you hear talked about from asymptomatic transmission to top up vaccines, not one of those things is supported by the science. Every piece is cleverly chosen adjacency to something that probably is true, but is itself a lie, and has led people to where I believe we are right now. And I don't normally use phrases like this, but I think we are standing at the very gates of hell.

Yeah, when I first heard the phrase lockdown, for example, I hope like most people, I thought this is a phrase you use in relation to controlling unruly prisoners. It's a control measure. And I think pretty much all that has happened since is to do with control this myth of asymptomatic transmission, which is simply not true, as I mentioned earlier, in order to transmit a virus, to be a good efficient source of infection, you have to have a lot of virus. And if you have a lot of virus and a new viruses attacking you and you are fighting back, that process produces symptoms, inevitably. It's not just occasionally, it must always happen. And so all people who are very good sources of infection are ill. So the whole idea of asymptomatic transmission, I would think if it occurs at all, it's like 1%, or 0,1%, **as good as a strong infectious case.**

The PCR test

So by the time we got to about the third main theme of this pandemic, and how to control it, I knew I was being lied to all the time by government scientists, their advisors by ministers, people on the

TV, and I'm afraid that impression has simply firmed up as time has gone on. And so it's all about control. Obviously, I have my own thoughts about what that control is going to be used for. And I certainly want to communicate that to your listeners and viewers. I remember one of the things I started doing early on, because I understood it quite well, was to publicly criticize the PCR or polymerase chain reaction test, because I knew enough about it. Not that I am a molecular biology expert, but I've hired people who are and, you know, I understand how PCR works, this idea of developing primers bait, as it were the thing you're trying to detect.

And then to amplify it repeatedly, potentially up to a trillion fold. People will be pretty familiar, I think with the idea of DNA testing that will be used for forensic purposes. And I point out to them that the PCR test uses most of the same technology.

And imagine if you were preparing for a trial, and you were able with your attorney to show the judge the conditions under which PCR testing was being done, relatively inexperienced lab staff, doing hundreds of 1000s of pipetting actions a day in the same laboratory. And you said, Look, Your Honor, you know, my client sample is one of those on the bench, there might be cross contamination in that. I suspect it's inevitable, but you'll get the result shortly.

I mean, the judge would just throw the entire evidence set out of court and rightly so.

But it's the same technology that's being used to work out whether your sample or that of a family member or someone in your community is what is not positive. For this virus. It's completely fraudulent the way it's being done. You simply cannot run a technique like that at industrial scale and expect the results to be meaningful and they're not. I don't think they've ever been meaningful.

False Positives

One of the frauds are governments and the people they hired to run the testing have done is they refused to entertain the idea that there is something called a false positive rate, I assure you if you run any diagnostic test repeatedly, sometimes there'll be a positive result when there's nothing in the sample, that's called a false positive. False Negatives also occur. But let's focus on false positives. We don't really know whether that's going to occur half a percent of the time or 4% of the time, this is enormously material, to telling you whether there's lots of infection in your community, or pretty much not at all.

But you will find nowhere in the world has anyone measured and released, often, this what's called operational false positive rate, you should disregard all announcements about **case rates** in your community, because they're completely fraudulent, you cannot run a medical diagnostic test, without those checks being run in situ, every time. And so I argued repeatedly, and what I was finding I was getting was censorship, insults. I mean, really quite unpleasant stuff on things like Twitter, people would be assigned to come and write up insulting and bad and hateful things about you, there was no way people were willing to engage scientifically. And I'll tell you what that did, very quickly. It caused less confidence and less angry people to stop commenting. And I think that was the point of it.

So as time went on, I found when I talked to fellow scientists, often retired scientists or academics, people I grew up with who are now now hold chairs in immunology. They would agree with me privately that PCR testing, as it was being done was completely nonsense and fraudulence, that the attribution of deaths in the way we've done it is completely stupid. lockdown clearly was irrational, and probably killing lots of people. But the difference was, they were not willing to say anything in public, because they said, it's been intimated that the authorities in the university don't want us to challenge the government narrative or that if it's advisors, so we're not. And that's what happened, we ended up with people looking the other way. And the more they look the other way, the fewer people who are like me. And so eventually, I became noteworthy for that bloke that keeps saying

things that scientist keeps challenging, that it was quite easy for them to write smear stories about me, call me an anti vaxxer, you know, suggests I lost my mind or gone off the rails because, you know, if you're a viewer, you don't have to listen to me if I'm any of those things. But I assure you, I'm none of those things. And the reason I'm commenting is because I believe it's not just my life, more importantly, that of my children and grandchildren that has been stolen from us by a systematic process of fear, and control. That's going to culminate in, I think some very horrible times, and I'm desperate to wake you up. So when your government lies to you once or twice, we're probably quite used to politicians, occasionally telling white lies, and we kind of let them but when they lie to you about something technical, something that you can check, and they do say repeatedly, over months, and they do it over many, many elements of the heart of the same event. Please, you've got to believe me, and not telling the truth. And if they're not telling the truth, that means there's something else afoot, and I'm here today to tell you that there's something very, very bad happening. And if you don't pay attention, you will soon lose any chance to do anything about it. And don't say you weren't warned, because I've been warning people as long as I can, as hard as I can. That you can still right now take your normal society back. You can take it back tomorrow. You don't need masks, they don't work. Forget lockdowns, they never slowed transmission, which took place mostly in institutions like hospitals and care homes. You don't need to be vaccinated by inadequately tested and somewhat dangerous, gene-based spike protein inducing proteins. And you don't need to do what you're told by corrupt scientists who are apparently advising our government. If you don't do that, in the next few weeks, it will be over I believe, if we get to a point of a so-called vaccine passport. I think you will have last chance to take it back and you will regret it.

Existing knowledge thrown overboard

Government policy from the beginning before even the virus arrived in our country has turned decades of understanding of how to protect people from infectious diseases on its head. So we've never used lockdown before. And the good reason for that is it's not effective. I've just explained that you need to be symptomatic in order to be infectious. So what we do is we quarantine the sick, we've always done that we've quarantined the sick, because that's how you avoid infecting the wider population. So the idea of quarantining the well, the so called lockdown is a new invention, and it has no foundations whatsoever, either in science or in the history of controlling epidemics. Also, mass testing of people without symptoms, has no underpinning science at all. And it's just a way of frightening people. And this idea, for example, that you can be ill, even though you have no symptoms, and you can be a respiratory virus threat to someone else, even though you have no symptoms. That's also invented in 2020. There's simply no history of it. And it defies common sense as well. So most people probably are aware, when I tell them, you've got an incredibly good facility for noticing as you walk towards somebody, whether they represent a health threat to you, you can tell just from the way their posture, how they're moving, you know, if they've got symptoms, eyes, nose, and so on. And if they do, you instinctively move around them. And if you think about it, that goes right back to prehistory, where one of the things that could kill you in winter time, would be catching a respiratory virus, perhaps being disabled for a few days, that might be enough to kill you. Even if you were fit and well, that might be enough to kill you. And so it's a strong evolutionary advantage for us to be highly aware of whether or not someone represented a threat to us. And the fact that we're very good at that, I think should tell you that there are they are reliable guides as to whether someone is a threat to you. So if they're not symptomatic, they're not going to infect you with flu, they might stab you, or hit you on the head, but they're not going to give you a chest infection that could kill you. And yet time and time again, lockdown, asymptomatic transmission, use of high multiplication, molecular biology tools, just over and over again, wearing masks. All of these things have either never been used before, or we already knew that they didn't work. And so I'm just just piecing them together, you can go and check these things in five minutes, if you haven't done already. But when the government lies to you for a few weeks, and then it extends to a few months, and then for over a year. You know, come on, this is a respiratory virus.

They say that it's slightly worse in the elderly (than) flu, it's definitely less serious to those who are younger and fit, than is influenza. That's clear from the published literature of COVID-19. So why is it you're still hiding from a threat to your health, as I say working age population is less of a threat to us and influenza. And you're still being told to run away and hide, after, I don't know, 15 months or 14 months, something like that, you must know that this is completely inappropriate.

Scientist not Propagandist

And something else is happening. But the point is, I am a scientist. I'm not any good at what I'm doing right now. I have no training whatsoever about how to talk to people who are not scientists. But I would say I'm a professional scientist, I've done very well. I've been, you know, really enjoyed my career and done well. You know, no one is paying me to do this. I'm receiving absolutely nothing except criticism, you know, social isolation from my peers, you know, so what I will tell you the reason I think you can trust what I'm saying is sincere, is that I'm getting, I'm paying to do this, right, I have lost work. You know, I have had people that I've known for decades, no longer wants to speak to me. So, I'm very sincere in what I'm doing. I'm warning you, that governments around the world and certainly yours locally is lying to you in various ways that are easy for you to establish. If you choose not to do that, there's nothing someone like me can do about it. Okay, you've been subject to propaganda and rise by people who are very well trained in how they do that. And I'm a complete amateur. So, I'm simply telling you, that if you want to check any one of the things I have said, you will find it to be true. And I would point out to you that if you find one thing your government has said, which is clearly not true, I asked you this. Why would you believe anything else they've told you? Don't you think that retired ex Pfizer guy might have something after all, you know if I can show you and I'm going to show you a few things that you can go and check. And if I'm right on I am then I beg of you to no longer assume what you're being told is true. That's the best I can do for you. I can't overwhelm, I can't sweep away a year of highly accurately done propaganda by people who are lying to you. But like, all I can do is point out that they're lying to you. And we will go through a number of examples. And it's really in the end, it's up to you.

Independent Research

If you would like to stand behind the desk called **comfortable lies**, there's absolutely nothing I can do to stop you. But if you would like to go to the desk called **uncomfortable truths**, which is the one I'm sitting behind, then welcome. And I'd like to help you. One of the reasons I went into the commercial sector early on, was I wanted to do applied research, I wanted to fight to be part of teams that would find hopefully find new cures very much I've always liked applied research, how things work, why they sometimes don't what we could do about that, that's the love of my life.

But I had some peers of mine who wanted to do blue sky research. And back in the 80s, I guess they could do that they could maybe get a petition to university and apply for for grants. And then they could literally pursue things they thought were interesting. And if they made good progress, that would often attract more funding, so they were driving the research.

Pharmaceutical industry, now as much as it ever was, still wants to pursue applied research. So some of the methods have changed. But the bit the objective is pretty much as it was when I joined it in the 80s.

But my academic friends report things are very different for them in universities. These days, the major funding bodies are still governments, but they tend to decide also directional themes often agreed internationally. And basically, if your research falls into one of those themes, you might get funded. And if it doesn't, you literally were starved out, because the only other source of funding are

large, private institutions. So, in Britain, for example, biggest one is the *Medical Research Council*, which is basically public money. And the next one is the *Wellcome Trust*, which has a very large endowment, and is used to drive research that's of interest to its to it to its management. And so, you know, basically, over time, and more recently, academic research pretty much has to toe the line. So, if there are certain new thematic areas that are being pursued by private funding, or endowments and scholarships, and so on, that comes from private foundations, those are the areas you have to work in. And it becomes quite difficult, independent researchers not only not supported, it's often not tolerated. And that makes I think it has made them very easily persuaded, should we say over the last year to do what they are told. And, most importantly, I've spotted this many times, they won't contest the COVID narrative. So over the last three months, I've spoken to eight professors at UK universities, whose discipline includes immunology, and I've discussed with them what I'm going to tell you about virus variants. And they've all agreed with my interpretation, none of them will say anything. And it's because I won't get a grant from the *Wellcome Trust* or the *Medical Research Council* as suggested, I won't get grants if I speak about this stuff. So I want you to know that the academics in your country are easily pushed around, frankly, by both politicians and people with lots of money. Then, in summary, the main change I've noticed over the last probably 40 years really is that university research has moved away from being directed mostly by the head of a department and individual researchers. And to be now much more directed from the center, from governments and from those that provide most of the grant funding. And it's to be regretted. I think there are obviously some advantages it means that the resources of a country do get focused in certain areas, and who's to say that they're not the right ones. But I think the key thing to note is that the academics are no longer independent.

So if you expect a university professor to be knowledgeable, yeah, they probably are. But if you expect them to be honest and independent, then you're naive. Because they've got to pay attention to where they're who's buttering the bread, who's providing their funding, and they're not able to be independent anymore.

Probably the only people you're going to find to in truly independence are former biotechnology CEOs, people like me, so I'm not a member of any club. Nobody pays me and maybe some retired academics, most of them still won't speak out, because they still have connections to their own departments, they might have an emeritus position. So there are very, very few truly independent people and the rest are, you know, subject to the influences you would expect if money comes from a very small number of sources, and it's quite, it's quite different from a few years from a few decades ago.

Antibodies and T-cell immunity

So one of the really seriously upsettingly misleading, kind of things that you hear very often is the implication, or perhaps even the statement that what gives you immunity to something, some infectious diseases, whether you've got antibodies to that thing. And I think they have done that, because most people think that antibodies are what confers immunity. And certainly antibodies are quite important. against certain infections, certainly bacterial infections, if you don't have antibodies, it can be very difficult. That's not the only part of your immunity. And importantly, immunity to viruses doesn't really **rely on antibodies at all**.

And I'll just explain why that is. Viruses are really tiny things, really tiny. And their business is to get as quickly as they can inside your cells. So, they bind to a receptor on the surface and inject themselves into your cell, they're inside. Antibodies are big molecules, and they're generally outside your cells. So just think about that for a moment.

Antibodies and viruses are in separate compartments, the viruses inside the cell, the antibodies are

outside the cell. So I'm not saying antibodies have no role. But they're really not very important. And this has been proven, there are some people in whom a natural experiment has occurred, they have a defect and actually don't make antibodies. But they're able to fight off COVID-19, the virus SARS-CoV2 quite well. And the way they do that is they have what's called T cell immunity, cellular immunity. And there are cells that are trained, as it were to detect virus infected cells, and to kill those cells. And that's how you defend yourself against a virus. So all of these mentions of antibody levels, it's just bunk. It is not a good measure of whether or not you're immune. It does give the idea that it does give evidence that you've been infected. But their persistence is not important to whether you've got immunity. And so I feel I've noticed the emphasis on antibodies, I think is really a psychological operation. To convince you member of the public, that you do know that it's antibodies that confer immunity. And so when they fall away, well, you must be losing immunity. I'm sorry, it's not true. There are multiple arms of your immune system. And what's almost never talked about is T-cell or cellular immunity. It's not a new thing, either. We've known this for decades. So it's not like our maybe there's something about T-cells, it's being implied that T-cells are kind of recently come on the scene.

And maybe there are questions about how important that is absolute rot. We've known about T-cells for decades, they were clearly in my undergraduate textbooks. And we've known about their importance in defending you against respiratory viruses, since probably the 1970s, certainly the 1980s. So don't believe anything where people suggest you that their role is uncertain. It's just bullshit. We've known for a very long time that they're absolutely central. And, you know, I would like to explain why the virus variance stories is just yet another lie. And it's involved T cells, your immune system has multiple components to it, because you are susceptible to infectious threats of various kinds, parasites, fungi, bacteria, viruses, those were the main categories. Well, obviously, they invade and threaten you in completely different ways. It would not be surprising then to learn, you've got, you know, four or five different arms of the immune system, innate immunity, mucosal antibody, T-cells, and complement.

There are all of these different wonderful systems that are integrated one with another, because you, it needs to defend you against all sorts of different threats in the environment. And what I'm telling you is that the emphasis on antibodies, in respect of respiratory viral infections is wrong. And you could, you can, establish that quite easily by doing some searching. And therefore, once you've established that for yourself, then you're probably realize, well, why they keep telling us about antibodies when they're probably not very important at all. And why aren't they talking about T-cells that are well established to be that which maintains the defense of your tissues? When this virus was first being talked about before it kind of landed? In each of our countries? I think we were given we were given exaggerated suggestions of exaggerated risks. You know, early on, people were talking about maybe 3% of people who were infected would die which is truly awful. Something like influenza, it's normally thought to be about 0.1%, or one in 1000. But even that doesn't give you any idea of your relative risk.

So let me just tell you, you know this anyway, the older you get, the lower the chance that you'll make your next birthday. So if you're 60 years (like) I am, statistically I've got about a 99% chance of making my next birthday. But by the time I reach my mid 80s, you know, it's maybe only got about a 50% chance of making my next birthday. And inevitably, you reach the point where, you know, you don't turn the cards over. If you think of the risk of dying for having been infected by influenza. Frankly, the older you get, and the ill you already are, the greater the risk that that will be what carries you off, you know, something has to, and this virus that causes Covid 19, is pretty much like that. It's just it's a slightly bigger risk for you, if you're above 70. And if already ill it is a bigger risk to you than flu, not a great deal more, but it's slightly worse. But the contrary is also true. If you are younger than 70 and you don't have prior illnesses, it's less of a risk to your health than is influenza. So it's just absurd that you should be happy or willing to let your economy and

civil society be smashed for something which represents for almost everyone working a lower risk than influenza. But that's true. Given this virus represents, at worst, a slightly bigger risk to the old and ill than just influenza and a less risk, a smaller risk to almost everyone else who's younger and fit. It was never necessary for us to have done anything. We didn't need to do anything lockdowns, masks, mass testing, vaccines even. There are multiple therapeutic drugs that are at least as effective as vaccines are, that they're already available and cheap. So inhaled corticosteroids that used in asthma, reduce symptomatology by about 90% study this published this week, an off patent drug called **Ivermectin**, it's one of the most widely used drugs in the world is also able to reduce symptoms at any stage of the disease, including lethality by about 90%. So you don't need vaccines, and you don't need any of the measures that have been introduced at all. So it's not just a shade of opinion here, I would say objectively, none of those things were ever required. And yet, governments and their scientific advisors have lied to us for a year. And I think they've just produced mayhem, potentially fatal damage to our economies and civil societies. So of the things that your governments and advisors have misled you about, I think most severely, and honestly frightens me, and he was his the catalyst for me making these recordings is the issue of virus variants. And the following issue, the related issue of top up vaccines or variant vaccine, so let me just quickly explain this is really, really critical to your very survival. It's quite normal for RNA viruses like SARS-CoV2 when it replicates to make typographical errors, that's what it does typos, it's got a very good error detection error correction system. So it doesn't make too many typos, but it does make some, and those are called variants. But it's really important that you know, that if you find the variant that's most different from the sequence identified in Wuhan, that variant's (most) distance is only 0.3% different from the original sequence.

So I'll say it another way. If you find the most different variants, it's 99.7%, identical to the original one. And I can assure you and I'm going to explain why I'm sure that that amount of difference is absolutely not possibly able to represent itself to you as a different virus. That's what people are leaving you to think that maybe variants will escape your immunity, either caused by vaccine or by natural infection, and it's an absolute lie. So why do I know that was 17 years ago, 18 years ago, there was a virus called SARS, which is actually very similar to SARS-CoV2, it's 80%. Similar to SARS-CoV2, and there were some experiments done last year, where they found people who've been infected by SARS 17 years earlier, and ask them to donate blood and they did. And there were tests done on the cells in that blood and they wanted to know where the circulating immune cells still able to recognize SARS 17 years later, and they were they all still had memory T cells circulating around their body. That's great. That's what I would have expected. They also did a really important experiment. They showed those same people's T-cells, the new virus, SARS-CoV2, and unsurprisingly to me, they recognize that new virus, and that's because the new viruses 80%, similar to the old one, 20 percent difference. So just to say again, a 20% difference was not enough to kid these people's immune system that it was a new virus, it easily recognized it as a sibling, a brother, a cousin of something that conquered already. So, when your government scientists tell you that a variant that is 0.3% different from SARS could masquerade as a new virus and be a threat to your health, you should know and I'm telling you, they are lying.

If they're lying, and they are, why is the pharmaceutical industry making top up vaccines? They are making them, you should be terrified at this point as I am, because there's absolutely no possible justification for their manufacture. But they're being made and the world's medicines regulators have said, because they're quite similar to the original vaccines, the ones that are being given now, we won't be asking them to do any clinical safety studies. So let me just say, again, the variants are not different enough to represent a threat to us, you do not need to top up vaccines, yet they are being made, and the regulators have more or less waved them through. I'm very frightened of that. There's no possible benign interpretation of this. I believe that they're going to be used to damage your health and possibly kill you. Seriously, I can see no sensible interpretation other than a serious attempt at mass depopulation.

Plausible Deniability

This will provide the tools to do it. Plausible deniability, because they will create another story about some sort of biological threats. And they will line up and get your top up vaccines and a few months or a year or so later, you will die of some peculiar, explicable syndrome, and they won't be able to associate it with the top up vaccines. But that's my belief that they're lying to you about variants. So they can make damaging top up vaccines that that you don't need to draw. And I think they will be used for malign purposes. And if you don't wake up, that's what's going to happen. I think during next year, I have heard a lot of people worry about the origins of this SARS-CoV2, I don't have a particularly strong opinion about it, because the evidence, you know, looks both ways and so on.

But it's very important that you know, that it's not true that we don't know a lot about it. We know an enormous amount about it, enormous amount about it. It's very similar to a virus that people have been infected and survived before. In fact, it's a lot less lethal than SARS, it spreads more easily, but it's a lot less lethal. And we know that the people injured and killed are only people who are elderly, or ill and usually both.

And so we're talking about less than 0.1%. It's been moving through our communities now for well over a year. You know, it's not some mysterious thing that's gonna just leap out from behind the car, but it's a straightforward respiratory virus. Most people have complete ample immunity to repel it. And I'll tell you a few things about it. Once you've been infected, you're immune, there's no uncertainty about it. It's been studied hundreds of times, now, lots of literature has been published. So once you've been infected, often you'll have no symptoms, you're now immune, probably for decades, that would be my default expectation, for decades.

It's simply not true, that the variants that it throws off as it replicates are sufficiently different from each other, to represent any threat at all. It's not even unlikely. It's impossible, based on the 1000s and 1000s of variants have been formed. They're all very, very similar to the original. In fact, I joke about them, call them **samians**. Because they're so similar, you might as well see them as the same.

vaccine passports

So you've been infected, you'll mostly survive unless you're very close to death anyway, you're then immune probably for decades, possibly for life. It's not true that that the variants represent any kind of threatens not true that you need a top vaccine most of you don't need a vaccine at all. Most of you would be well advised to stay away from experimental vaccines, unfortunately, that do come with a blood clot risk. Why would you take a risk with your health for something that's not as stretchy?

So, I'm particularly troubled at the moment by the repeated mentioned in the media and by all sorts of people of so-called vaccine passports. Now, the only reason we've ever had passports for certain immunizations prove you've been immunized against certain diseases are those when the disease is extremely lethal, something like **yellow fever**, and when you might otherwise bring back to a community that has no immunity whatsoever, a really dangerous pathogen. So, if you want to go to certain parts of the world, where yellow fever is present, you need to be vaccinated, one to protect you from a disease that might kill you. And to make sure you don't bring it home to people in a community where there's no yellow fever. And so of course, there's no immunity to it, you might have a little card that says, You were immunized once for life for yellow fever. That doesn't tell you you need a passport against a common and garden respiratory virus. Let me just explain why. If you're an elderly and vulnerable person, you've chosen to be vaccinated, you are now protected against that virus. It doesn't matter what anyone around you is doing, whether they've got the virus

or not got the virus, you've got your armor on. You don't need to see anyone else's vaccine status, you don't need to know anything about them. If you're younger and fit person, you've looked at the literature and decided rightly, you don't need to take a vaccine because you've got perfectly good immunity of your own. You too don't care what the immune status of anybody around you is. So you don't need to know, vaccine passport status. So I've just explained someone who's been vaccinated doesn't need to see someone else's vaccine passport. And someone not vaccinated doesn't need to see anyone else's vaccine passport, they don't provide you with any safety at all. They're not required at all. What they provide, though, is complete control over your movements, to whoever controls the database that your vaccination status is connected to. Let me just quickly explain it. I hope you grasp this. Because this is not optional. This is what's going to take over your life in a way that George Orwell in 1984 didn't even dream of.

Imagine you've been vaccinated, and you've been awarded a vaccine passport on an app. It's going to be the world's first database that contains your name, a unique digital ID in the same format as absolutely everybody else on the planet on the same database. And it'll have like an editable health related flag that will say, thumb up that you've been vaccinated or maybe a red flag if you haven't been. Now the algorithm that rules that works out what you can do with or without your vaccine passport. That's what's going to control the rest of your lives until you die. So you might think, oh, that's an exaggeration, they're only going to need vaccine passports, perhaps to enter a sports ground or big public building like a museum. That's that might be true initially. But imagine if they say, No, you need your valid vaccine passport to enter any large, shopping complex. And then every large store that's going to provide a coercive, if a coercive pressure on people who've chosen not to be vaccinated, they'll have to get vaccinated. Now, it's an illegal thing for your government to coerce you to accept any medical treatment. And it's against the Nuremberg Code that was put in place after the Nazi doctors were convicted of performing experiments on on people, including lethal experiments that prevent you coercing people to take experimental therapies because they're now they're taking part in a medical experiment against their will. But if this vaccine passport system is up and running, and you're told say that you can't enter any shop at all, without keeping your vaccine passport, now you can't send to any retail establishment, you can't control what those rules are. You've no idea who's setting those rules don't allow this system to come into force. It's going to be used to coerce you. And let me just give you another example. You know, those variants and the top up vaccines I spoke about, I believe, if you allow vaccine passports to come into force, you'll be pinged one day and little advise you to go to the medical center to have your top up vaccine.

And if you choose not to, your vaccine, your passport validity will expire. Which means you won't be able to enter a shop. You may not eventually be able to use your bank card. All somebody needs to do is set a rule that says as after given the date before any bank card can be used. A vaccine passport has to be put onto the card reader. So just take it from me you don't need vaccine passports they provide nothing whatsoever to you or anybody else in relation to safety. But you will give away to whoever controls that database and the rules, complete control over everything you do.

Let me give you one last example. You're owning this vaccine passport, and it pings. And in addition to advising, you need to come to the health center for your top up vaccine, perhaps your second one in a year. it also advises you that you need to bring your small grandchild down, because your daughter hasn't brought the little lad in yet. And they say if you don't bring that grandchild down, your vaccine passport will expire, and that of your daughter as well. Now, try resisting that. Simply think, this system has been put in place using lies. And it's been put in place using lies for some purpose. And I believe that purpose is complete totalitarian control. And I think the purpose of that is going to be mass depopulation, I can't think of a single benign interpretation for the simple creation of these top up vaccines, let alone the lies that surround them. And I'm absolutely terrified that the combination of vaccine passports and top up vaccines is going to lead to mass depopulation and deliberate execution, potentially of billions of people,

How to stop it

You can stop it. Once you've heard what I'm saying, even if you like the idea of vaccine passport, put the damn thing in place using written records or something, something that will, you know, allow you, you know, to show you've been vaccinated, but do not allow it to be on an interoperable, global fixed format database, because that will be the end of human freedoms. And I just see no way of recovering from that once the system is up and running. The frustration I feel is that we simply can't get this information to very many people, and a very few of the people who will even hear this will do anything with it. That's why I'm literally at the end of my tether. I've tried and tried and tried. And I can see that the people running this have played an absolute blinder. They've they must have thought about it for some time. And they, basically, they've used a relatively small number of lies, which they've chosen to be quite close to something that's plausible. And then they've just, you know, pounded this script of half a dozen points relentlessly. The only other thing they've needed is to frighten people to death, and then censor everybody else. That's all they've needed to do really simple story, repeated censorship and fear. And here we are. So it's just, remember, we're subject to censorship. So of course, I've been busy as hell. And of course, you never have heard of me, this is the problem now, almost no one has heard of me or anyone speaking similarly, almost nobody. You know, I'm, it's just amazing that, but it just shows how, in fact, one of the reasons I'm very disappointed is I've had a realization over recent weeks that it really doesn't matter what we do, if we do the things that those operating this global fraud, expect, we will lose. They already know we'll do these things. They've mapped it out. And they've worked out what are the things that are most likely to happen, it'll be well, that we some noisy individuals, while as long as we can control the amount of the Share of Voice they get, then we don't need to be worried about them. And I'm worried that I've done absolutely nothing that differs from what they have already modeled and wargames. And that did not work or they wouldn't have moved off with this plan. So unfortunately, the conclusion I've got is, collectively we need to do something unexpected. And if we do expected things, we will lose.

That's a bit pessimistic, but forgive me, I've been a research scientist all my life, or propagandists is only recently I realized that I'm in a trap really, that I'm doing. I'm playing my role as an almost like an icon in their game. I'm a representative of a tiny number of people who be noisy and they're fine with that. Government knows who I am. I know people in the government. I've been advised they knew who I am. But they won't do anything because I'm ineffective. They haven't left me alone because I'm off target, they've left me alone, because they know I can't reach anybody. I briefly worked with the the UK Chief Scientific adviser. So Patrick Vallance when he was as I was, researchers in the welcome research labs in about late 1980s.

You know, I know who he is, he knows who I am. But they leave me alone because I'm ineffective. If I become effective, that would be different. But I think they're not worried because they have complete control of the mass media, TV, radio, newspapers, Internet, and the only people who will see me, are really people already looking for information. So I doubt I'll convert many, many people, because people who need to be converted, are not looking. They're looking at main media, and that message is completely controlled and hermetically sealed. So if we carry on doing the same things, we're just playing out our expected role in a simulation that whoever's running this has already thought about. So I don't want to worry you, but probably true, isn't it? My hope is that, for example, the United States, God bless its federal system, you've shown diversity, some states have done different things from others. And so I think it's quite useful because the people, not just in the US, but outside, it can see that it hasn't made any difference, you know, if you're South Dakota, or Florida, or California, it's pretty much turned out to be the same. So the measures that have been put in place are unnecessary and have made no difference except to worsen the outcome. For the people who live in those states. It's destroyed the economy and civil society, and probably cost people their lives by depriving them of ready access to normal health care, which has been kind of smashed by

our responses to this virus.

But in the European countries, unfortunately, in every country, whatever set of measures they chose, they were uniform, north, south, east and west. And so we never had any opportunity to see what would have been the counterfactual.

So each country is pretty much hermetically sealed. And, you know, whoever is running, this has complete control of the message and the medium.

emergency use authorization

Something very important for you to know, the vaccines that these gene-based vaccines are, they're not approved by any medical authority, like the FDA, European medical agency, Medicines Agency, they are available only what's called an **emergency use authorization**. So if there wasn't an emergency, they simply couldn't be administered at all. But it's very important that you know that they are emergency use authorized only. That is, we don't know very much about them. We don't know anything at all, about the potential for long term side effects. So if it turns out, for example, that they induce cancer in one in 10. People, I don't think that's likely. But since we don't know anything, anything's possible, right? So it's inappropriate to be giving these to more than the most vulnerable people. So when they first were emergency-use-authorized, and they were to be used only in the elderly, and already ill, I could understand why they were doing that. But when in the UK, the government said, now we've got the list of everybody else all the way down to the age of 18, that we want all of them to be offered the vaccine, and it's clearly more than an offer. Now, they're even running studies in children who don't suffer from COVID-19, not a single child in the UK, who was well, has caught this virus and died, not one. But there are 10 million children under the age of 10, who I'm confident they're going to be wanting to vaccinate. Now, this is completely wrong. You know, there's simply no basis for doing this, it will result in injury and death of some people. Every medicine has some side effects. So you would never use it on scale. Unless the people receiving it were at risk of the of the illness and they're not. So you will notice if you ask some friends who have been vaccinated, ask them where they informed in writing, that these are experimental medicines that have not yet been approved? If you weren't, you were administered an experimental agent without your consent. That is contrary to the Nuremberg Code, a code put in place after World War Two, recognizing the foul human experiments performed by Nazi doctors, the Nazi doctors, by the way, were pretty much all hanged for their crimes against humanity. I'm sorry to say that NHS doctors who are administering these agents to people who are not at risk from the virus, and they're not telling them that they're experimental, are also breaching the Nuremberg Code, and I believe they're doing it knowingly. And I think there should be a Nuremberg 2 and I think those physicians should be tried on those charges and appropriate sentences handed down. So if you're one of those physicians, I hope to be around to see you in the court. This is certainly a time for people who know or suspect that what is being said to you by our politicians and scientific advisors is wrong. It's time to stand up and say No, withdraw your consent.

There's something awful happening. You know it those people, if you were listening to me that you've suspected for some time that this isn't right, Don't look away. Don't look away. It's time now to find other people like you who are not quite sure, but really suspicious. Find somebody else and talk to them. Because if you find someone else who thinks can't, I'm glad you said that, because I've thought this is lies as well, then the two of you can go and find the third person. And just net once you've woken up and realize you're being lied to. It's very, very frightening. You don't have to do anything with that at first, except, don't forget that realization, find someone else who also feels the same. Don't be afraid to be a little bit wrong.

The people around you don't know any better, do they? If they're experts, well, they're probably not going to be, then they would be able to tell you what I'm saying is true. And if they're like you,

A FINAL WARNING TO HUMANITY FROM FORMER PFIZER CHIEF SCIENTIST MICHAEL YEADON

suspicious, but they're not really experts, then they're not really going to be able to tell you, you're wrong. So if you think something's wrong, you're right, go and find someone else who feels the same. Never Look Back and accept what the government's telling you. It's your last chance to rescue your own liberty and that of your children and grandchildren, it's going to vanish. So if you're suspicious, if you're frightened, if you think something's up, you're absolutely right. This is our last chance. I think we're in the last few weeks in the UK, of liberal democracy, and it will then vanish forever. So, you know, take your courage in your hands, the worst that will happen is someone will laugh at you. It's not a big deal, is it? Find someone else who's also suspicious. And if you find that person, go and find yet other people, you don't need to do anything violent. You just need to say, you know, stop, I'm withdrawing my consent. This is a stupid experiment. We've had enough now, end of story, go back to normal life. That's all you need to do at the moment. It's so astonishingly simple, normality is literally at arm's length. But it won't be soon if the vaccine passports system is voted in by our corrupt people in Westminster, who are also stupid. That will be the end of liberal democracy. And I don't think there's any way out of that. We'll be standing at the gates of hell.