

## Medical-Political Complex is Corrupt & Suppressing Science

By Arjun Walia, Collective Evolution, 22 November 2020

*British Medical Journal Editor Argues “Medical-Political Complex” is Corrupt & Suppressing Science*

During the COVID-19 pandemic, the world has witnessed the suppression of not only science, but a number of prominent scientists and doctors from around the world. These doctors and scientists have shared their research, observations and opinions about COVID-19 that directly contradicts the information given to the citizenry by the World Health Organization (WHO) and government health authorities in dozens of countries.

Mainstream media is constantly giving attention to government affiliated scientists and is only sharing one perspective on this pandemic. Social media platforms like Facebook, YouTube, Vimeo, and Twitter have all been actively censoring a number of scientists and doctors, but why? Why censor information if it's not true? How can tens of thousands of doctors and scientists be sharing a perspective that's constantly ridiculed by mainstream media?

I'm not talking about the more controversial films or messages like what has been touted by David Icke or the film Plandemic, we're talking about real science from tens of thousands of respected and credentialed health professionals. Why are they not allowed to be heard? Why are there 'fact-checkers' going around the internet telling people what is and what isn't?

These scientists have not backed down, for example, [Michael Levitt](#), a Biophysicist and a professor of structural biology at Stanford University criticized the WHO as well as Facebook for censoring different information and informed perspectives regarding the Coronavirus.

Dr. Martin Kulldorff, professor of medicine at Harvard University, a biostatistician, and epidemiologist, Dr. Sunetra Gupta, professor at Oxford University, an epidemiologist with expertise in immunology, and Dr. Jay Bhattacharya, professor at Stanford University Medical School created "[The Great Barrington Declaration](#)." It now has approximately 45,000 signatures from doctors and scientists, the declaration strongly opposes COVID lockdown measures, stating that they do more harm than good and are not really effective.

Dr. Sucharit Bhakdi, one of the most cited scientists in German history, who was chair of Medical Microbiology at the University of Mainz along with his wife Karina Reiss Ph.D have published a book titled "[Corona, False Alarm? Facts & Figures](#)." They are part of [more than 500](#) German doctors & scientists who have signed on as representatives of an organization called "[Außerparlamentarischer Corona Untersuchungsausschuss](#)". The organization opposes measures taken by governments worldwide.

These are just a few of countless examples out there from so many different countries. COVID-19 has united prominent scientists and doctors from around the world in large numbers, yet their concerns go unheard. Sometimes it seems like the mainstream media can make the minority feel like the majority, and the majority feel like the minority.

The general theme among these groups is that COVID-19 is not as dangerous as it's been made out to be, and that there is manipulation of science and data on several different levels, from the infection/fatality rate, the number of deaths attributed to COVID-19, the number of

cases that are actually out there, and the idea that the virus is being made out to be much more dangerous than it actually is.

**What Happened:** The latest example comes from [Dr. Kamran Abbasi](#), executive editor of the prestigious *British Medical Journal*, editor of the *Bulletin of the World Health Organization*, and a consultant editor for PLOS Medicine. He is editor of the *Journal of the Royal Society of Medicine* and *JRSM Open*.

He recently [published a piece](#) in the BMJ, titled “Covid-19: politicisation, “corruption,” and suppression of science.”

In his [article](#), he writes the following:

*Politicians and governments are suppressing science. They do so in the public interest, they say, to accelerate availability of diagnostics and treatments. They do so to support innovation, to bring products to market at unprecedented speed. Both of these reasons are partly plausible; the greatest deceptions are founded in a grain of truth. But the underlying behaviour is troubling.*

*Science is being suppressed for political and financial gain. Covid-19 has unleashed state corruption on a grand scale, and it is harmful to public health. Politicians and industry are responsible for this opportunistic embezzlement. So too are scientists and health experts. The pandemic has revealed how the medical-political complex can be manipulated in an emergency—a time when it is even more important to safeguard science.*

*The UK’s pandemic response provides at least four examples of suppression of science or scientists. First, the membership, research, and deliberations of the Scientific Advisory Group for Emergencies (SAGE) were initially secret until a press leak forced transparency. The leak revealed inappropriate involvement of government advisers in SAGE, while exposing under-representation from public health, clinical care, women, and ethnic minorities. Indeed, the government was also recently ordered to release a 2016 report on deficiencies in pandemic preparedness, Operation Cygnus, following a verdict from the Information Commissioner’s Office.*

*Next, a Public Health England report on covid-19 and inequalities. The report’s publication was delayed by England’s Department of Health; a section on ethnic minorities was initially withheld and then, following a public outcry, was published as part of a follow-up report. Authors from Public Health England were instructed not to talk to the media. Third, on 15 October, the editor of the *Lancet* complained that an author of a research paper, a UK government scientist, was blocked by the government from speaking to media because of a “difficult political landscape.”*

*Now, a new example concerns the controversy over point-of-care antibody testing for covid-19. The prime minister’s Operation Moonshot depends on immediate and wide availability of accurate rapid diagnostic tests. It also depends on the questionable logic of mass screening—currently being trialled in Liverpool with a suboptimal PCR test.*

*The incident relates to research published this week by *The BMJ*, which finds that the government procured an antibody test that in real world tests falls well short of performance claims made by its manufacturers. Researchers from Public Health England and collaborating institutions sensibly pushed to publish their study findings before the government committed to buying a million of these tests but were blocked by the health department and the prime minister’s office. Why was it important to procure this product without due scrutiny? Prior publication of research on a preprint server or a government website is compatible with *The BMJ*’s publication policy. As if to prove a point, Public*

*Health England then unsuccessfully attempted to block The BMJ's press release about the research paper.*

*Politicians often claim to follow the science, but that is a misleading oversimplification. Science is rarely absolute. It rarely applies to every setting or every population. It doesn't make sense to slavishly follow science or evidence. A better approach is for politicians, the publicly appointed decision makers, to be informed and guided by science when they decide policy for their public. But even that approach retains public and professional trust only if science is available for scrutiny and free of political interference, and if the system is transparent and not compromised by conflicts of interest.*

*Suppression of science and scientists is not new or a peculiarly British phenomenon. In the US, President Trump's government manipulated the Food and Drug Administration to hastily approve unproved drugs such as hydroxychloroquine and remdesivir. Globally, people, policies, and procurement are being corrupted by political and commercial agendas.*

*The UK's pandemic response relies too heavily on scientists and other government appointees with worrying competing interests, including shareholdings in companies that manufacture covid-19 diagnostic tests, treatments, and vaccines. Government appointees are able to ignore or cherry pick science—another form of misuse—and indulge in anti-competitive practices that favour their own products and those of friends and associates.*

*How might science be safeguarded in these exceptional times? The first step is full disclosure of competing interests from government, politicians, scientific advisers, and appointees, such as the heads of test and trace, diagnostic test procurement, and vaccine delivery. The next step is full transparency about decision making systems, processes, and knowing who is accountable for what.*

*Once transparency and accountability are established as norms, individuals employed by government should ideally only work in areas unrelated to their competing interests. Expertise is possible without competing interests. If such a strict rule becomes impractical, minimum good practice is that people with competing interests must not be involved in decisions on products and policies in which they have a financial interest.*

*Governments and industry must also stop announcing critical science policy by press release. Such ill judged moves leave science, the media, and stock markets vulnerable to manipulation. Clear, open, and advance publication of the scientific basis for policy, procurements, and wonder drugs is a fundamental requirement.*

*The stakes are high for politicians, scientific advisers, and government appointees. Their careers and bank balances may hinge on the decisions that they make. But they have a higher responsibility and duty to the public. Science is a public good. It doesn't need to be followed blindly, but it does need to be fairly considered. Importantly, suppressing science, whether by delaying publication, cherry picking favourable research, or gagging scientists, is a danger to public health, causing deaths by exposing people to unsafe or ineffective interventions and preventing them from benefiting from better ones. When entangled with commercial decisions it is also maladministration of taxpayers' money.*

*Politicisation of science was enthusiastically deployed by some of history's worst autocrats and dictators, and it is now regrettably commonplace in democracies. The medical-political complex tends towards suppression of science to aggrandise and enrich those in power. And,*

*as the powerful become more successful, richer, and further intoxicated with power, the inconvenient truths of science are suppressed. When good science is suppressed, people die.*

**The Takeaway:** What does it say about our world when so many voices are silenced? Why is this happening? How can so many doctors and scientists be wrong, ridiculed, completely ignored and censored to the point where not many people are even aware of the information they are sharing? Why do we only get one perspective from the mainstream media? Can we continue to rely on government, and government health agencies to provide us with real information and recommendations that have the best interests of the people at heart, or is everything we are seeing an attempt to not only control, but profit off the human race? Why have so many people lost faith in their government and the ability of it to deliver accurate and real information to the people?

Is it time to take matters into our own hands? Do we really live in a democracy when the voice and the will of so many people continue to go unheard and unacknowledged?

We're in a time where these very questions are more important to answer than ever before. Action is needed, worldviews are shifting, practice is everything.