# New American

Written by <u>William F. Jasper</u> on April 20, 2020 Published in the April 20, 2020 issue of <u>the New American</u> magazine. Vol. 36, No. 08



### **Plagued by Bad Data**

Attempting to quantify mortality from diseases is a problematic enterprise, particularly on a national or global scale, due to the vast differences in access to medical care and the wide variability in monitoring, recording, and reporting from one locale or nation to another. The annual influenza (flu) death statistics from organizations such as the U.S. Centers for Disease Control (CDC), World Health Organization (WHO), and the Chinese Center for Disease Control and Prevention (China CDC) have been criticized for years by scientists, physicians, and epidemiologists as being methodologically flawed, bias infected, and wildly inflated.



In a 2011 study, Peter Nicolai Doshi of MIT wrote that "influenza vaccine effectiveness has been vastly overstated, predictive models of pandemic influenza are demonstrably flawed, and officials conflate true influenza with influenza-like illness."

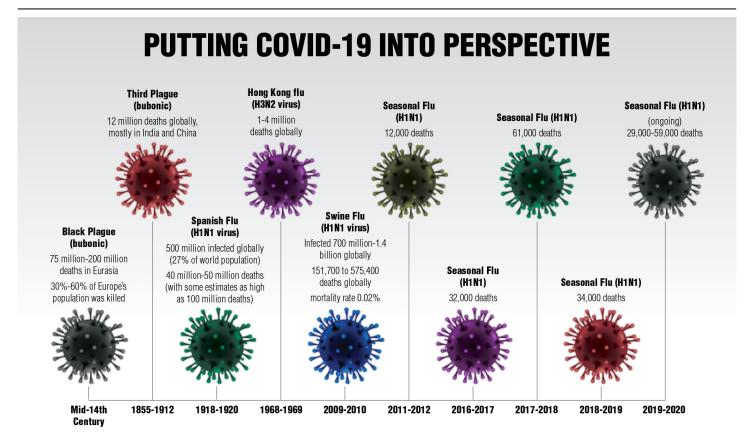
CDC admits that its flu death statistics are not actually confirmed cases but the result of "mathematical modeling."

The same flaws and manipulation bedevil the current CDC/WHO statistical pronouncements concerning COVID-19. Dr. John P.A. Ioannidis, an epidemiologist and co-director of Stanford's Meta-Research Innovation Center, wrote on March 17, "Three months after the outbreak emerged, most countries, including the U.S., lack the ability to test a large number of people and no countries have reliable data on the prevalence of the virus in a representative random sample of the general population." Dr. Ioannidis continued, "This evidence fiasco creates tremendous uncertainty about the risk of dying from Covid-19. Reported case fatality rates, like the official 3.4% rate from the World Health Organization, cause horror — and are meaningless."

Nevertheless, the WHO and CDC are using COVID-19's supposedly greater (and unverified) 3.4-percent fatality rate to justify totalitarian policies that weren't even attempted in previous epidemics/pandemics, such as those listed below. Yet somehow we survived those plagues — without succumbing to the even worse plague of despotism.

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