



Hydroxychloroquine and the Crisis of Reality

America in particular and Western civilization in general has a problem with epistemology. One of the key areas of philosophical inquiry, epistemology is the study of knowledge. Integral to the study of knowledge is the concept of truth.

Knowledge is not independent of truth, for knowledge that is entirely based on non-truth is not knowledge at all, but merely a simulacra of knowledge at best. At worst, it is an imposter — a lie.

The crisis is acute in most areas of human endeavor in America at present, with the recent presidential election being the most obvious and current case in point. The mainstream media, for instance, infamously declared Joe Biden to be president-elect, when in fact the media have no actual power to make that determination and when, in fact, the actual results remain very much in dispute. Thus we have the acute epistemological crisis in politics. One side holds that their “knowledge” is in accord with “truth” because it supports their emotional desires. The other side would have knowledge be in accord with evidence sourced from a material reality that exists independently of the human mind and its emotional states. The emotional side is occupied by the Democrats who have been in increasingly open revolt against reality for some time. For one long-standing example of this, consider abortion — Democrat partisans have been insisting for decades, counterfactually, that children in the womb, or even just born, are not really human at all and thus can be killed with impunity. For this side, ballots don’t have to be materially “real” to count toward the election. For the other side, a ballot should be materially real in that it is cast by an actual living person who voted legally within the constraints of duly enacted legislation.



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Another compelling example of this same epistemological crisis comes from the world of medicine and our unfortunate experience with COVID-19. The acute crisis here arises in the treatment of the condition using hydroxychloroquine either alone or in combination with other drugs. There are material results that strongly suggest that using hydroxychloroquine is a valid and helpful approach in treating COVID patients. Notwithstanding those results and the actual experiences of doctors and patients with the treatment, much effort has been expended by those aligned with the international “progressive” apparatus — of which the American Democrat Party and mainstream media are key parts — to construct an alternative paradigm in which, among other things, hydroxychloroquine is both ineffective and dangerous.

The divergence of the internationalist progressive paradigm from the real has been documented in a recent paper by several French researchers. Available online since June, the work of these researchers appears in the November 2020 issue of the journal *New Microbes and New Infections*.

Introducing their work, the authors who are affiliated with IHU-Méditerranée Infection (a significant French infectious disease research facility), Aix Marseille Université, and Hôpital Timone, a large hospital in Marseille, explained that they set out to examine the literature on the use of chloroquine derivatives to treat COVID-19. What they found was a conundrum. “We were surprised to find major discrepancies between study conclusions ranging from dramatic clinical improvement to dramatic increase in mortality rates under chloroquine-derivative treatment,” the researchers wrote. “We sought to understand what could explain such differences.”

What they found was that the difference in results was attributable to the difference between actual real-world results and those constructed artificially using “big data” approaches.

For the latter, results were uniformly negative with regard to hydroxychloroquine. “All ‘big data’ studies reported a lack of beneficial effect of the treatment,” they reported, while “clinical studies were more likely to report a favourable effect of chloroquine derivatives in individuals with COVID-19 ($p < 0.05$). Consistently, clinical studies with detailed treatment protocol were more likely to be associated with the observation of a favourable effect of the treatment ($p < 0.05$).”

As to the overall efficacy of HCQ, they wrote: “a meta-analysis of publicly available clinical reports demonstrates that chloroquine derivatives are effective to improve clinical and virological outcomes, but, more importantly, they reduce mortality by a factor of 3 in patients with COVID-19.”

The disconnect between the manufactured “reality” of “big data” and real-world clinical experience appeared starkly obvious to the French researchers when it came to the safety of chloroquine treatments.

“We cannot believe that in some series up to 8% of deaths are due to cardiac rhythm disorders, whereas all the electrocardiograms performed in the IHU (our centre) for 4000 patients and analysed by a team of cardiologists specializing in heart rhythms have not seen any, except for an increase in QTc, which justified stopping treatment in only three individuals,” they wrote.

Further, they continued:

Under these conditions we thought that people who really observed the patients had a very different perception of the results from people who had not observed the patients but retained observations. The major elements of this study are that, overall, there is an



Written by [Dennis Behreandt](#) on November 16, 2020

extremely significant difference between the analyses of data not collected directly by the doctors who cared for the patients and the studies carried out by the physicians who set up these studies and cared for patients, including the randomized studies. The second thing is that in the studies conducted electronically, the treatment is never really specified, with the dosage and duration of treatment making it impossible to assess efficacy (dose too low) or toxicity (dose too high). In addition to this major bias, we also noted a significant bias when the authors had conflicts of interest due to their relationship with industrialists trying to market molecules in the same therapeutic framework competing with HCQ.

<https://doi.org/10.1016/j.nmni.2020.100709>

To the French researchers, this points to an attempt to manufacture an alternative, non-real, approach to “truth.”

“Indeed,” said the researchers in a stunning passage, “the discrepancy between clinicians and epidemiologists reflects a major trend, that of the analysis of large medical data, with a database warehouse more or less well filled by individuals who are not directly included in the work reported. This analysis is unrelated to the observations made by physicians who are in direct contact with patients, and which lead to divergent interpretations and opposite conclusions, which are of real interest and show that the world predicted by Baudrillard — a parallel world of numerical analysis completely disconnected from reality—is being born.”

The work of Jean Baudrillard the researchers cited is *Simulacra and Simulation* in which the French sociologist wrote:

Abstraction today is ... the generation by models of a real without origin or reality: a hyperreal. The territory no longer precedes the map, nor survives it. Henceforth, it is the map that precedes the territory — PRECESSION OF SIMULACRA — it is the map that engenders the territory.... It is the real, and not the map, whose vestiges subsist here and there, in the deserts which are no longer those of the Empire, but our own. The desert of the real itself.

<https://archive.org/details/simulations0000baud/mode/2up>

The success of the hyperreal, so integral to the progressive Deep State, would represent an unprecedented disaster for civilization. It has already resulted in far too many deaths of those who died of COVID unnecessarily — including those who did not get HCQ treatments that might have helped them, those who were needlessly exposed in nursing homes, and those who could not get treatment for other conditions due to the illogic of lockdowns.

Darker storm clouds yet approach: If objective truth is extinguished — if the real is to be permanently obscured — then anything the progressive Deep State chooses to declare to be true, thus becomes truth.

All that will be left, [as Anthony Fauci says](#), is “to do what you’re told.”



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