Facts about Covid-19

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Fully referenced facts about Covid-19, provided by experts in the field, to help our readers make a realistic risk assessment. (Regular updates below)

"The only means to fight the plague is honesty." (Albert Camus, 1947)

Overview

1. According to the latest immunological studies, the overall **lethality** of Covid-19 (IFR) is about 0.1% to 0.3% and thus in the range of a severe influenza (flu).

2. For people at high risk or high exposure (including health care workers), early or prophylactic **treatment** is essential to prevent progression of the disease.

3. In countries like the US, the UK, and also Sweden (without a lockdown), **overall mortality**since the beginning of the year is in the range of a strong influenza season; in countries like Germany and Switzerland, overall mortality so far is in the range of a mild influenza season.

4. In most places, the **risk of death** for the general population of school and working age is in the range of a daily car ride to work. The risk was initially overestimated because many people with only mild or no symptoms were not taken into account.

5. Up to 80% of all test-positive persons remain symptom-free. Even among 70-79 year olds, about 60% remain **symptom-free**. About 95% of all people develop at most moderate symptoms.

6. Up to 60% of all persons may already have a certain cellular **background immunity** to the new coronavirus due to contact with previous coronaviruses (i.e. cold viruses). The initial assumption that there was no immunity against the new coronavirus was not correct.

7. The **median age** of the deceased in most countries (including Italy) is over 80 years (e.g. 86 years in Sweden) and only about 4% of the deceased had no serious preconditions. The age and risk profile of deaths thus essentially corresponds to normal mortality.

8. In many countries, up to two thirds of all extra deaths occurred in **nursing homes**, which do not benefit from a general lockdown. Moreover, in many cases it is not clear whether these people really died from Covid-19 or from weeks of extreme stress and isolation.

9. Up to 30% of all **additional deaths** may have been caused not by Covid-19, but by the effects of the lockdown, panic and fear. For example, the treatment of heart attacks and strokes decreased by up to 60% because many patients no longer dared to go to hospital.

10. Even in so-called **"Covid-19 deaths"** it is often not clear whether they died *from* or *with*coronavirus (i.e. from underlying diseases) or if they were counted

as "presumed cases" and not tested at all. However, official figures usually do not reflect this distinction.

11. Many media reports of **young and healthy people** dying from Covid-19 turned out to be false: many of these young people either did not die from Covid-19, they had already been seriously ill (e.g. from undiagnosed leukaemia), or they were in fact 109 instead of 9 years old. The claimed increase in Kawasaki disease in children also turned out to be exaggerated.

12. Most **Covid-19 symptoms** can also be caused by severe influenza (including pneumonia, thrombosis and the temporary loss of the sense of smell), but with severe Covid-19 these symptoms are indeed more frequent and more pronounced.

13. Strong increases in **regional mortality** can occur if there is a collapse in the care of the elderly and sick as a result of infection or panic, or if there are additional risk factors such as severe air pollution. Questionable regulations for dealing with the deceased sometimes led to additional bottlenecks in funeral or cremation services.

14. In countries such as Italy and Spain, and to some extent the UK and the US, **hospital overloads** due to strong flu waves are not unusual. Moreover, this year up to 15% of health care workers were put into quarantine, even if they developed no symptoms.

15. The often shown exponential curves of **"corona cases"** are misleading, as the number of tests also increased exponentially. In most countries, the ratio of positive tests to tests overall (i.e. the positivity rate) remained constant at 5% to 20% or increased only slightly. In many countries, the peak of the spread was already reached well before the lockdown.

16. Countries *without* **lockdowns**, such as Japan, South Korea, Belarus and Sweden, have not experienced a more negative course of events than many other countries. Sweden was even praised by the WHO and now benefits from higher immunity compared to lockdown countries. 75% of Swedish deaths happened in nursing facilities that weren't protected fast enough.

17. The fear of a shortage of **ventilators** was unjustified. According to lung specialists, the invasive ventilation (intubation) of Covid-19 patients, which is partly done out of fear of spreading the virus, is in fact often counterproductive and damaging to the lungs.

18. Various studies have shown that the main **routes of transmission** of the virus are neither long-range aerosols (i.e. tiny particles *floating* in the air) nor smear infections (i.e. on surfaces), but *direct* contact and *droplets* produced when talking or coughing. However, in some circumstances, indoor aerosol transmission appears to be possible.

19. There is still little to no scientific evidence for the effectiveness of **cloth face masks** in *healthy* and *asymptomatic* individuals. Experts warn that such masks may interfere with normal breathing and may become "germ carriers" if used repeatedly.

20. Many **clinics** in Europe and the US remained strongly underutilized or almost empty during lockdowns and in some cases had to send staff home. Millions of surgeries and therapies were cancelled, including many cancer screenings and organ transplants.

21. Several **media** were caught trying to dramatize the situation in hospitals, sometimes even with manipulative images and videos. In general, the unprofessional reporting of many media maximized fear and panic in the population.

22. The **virus test kits** used internationally are prone to errors and can produce false positive and false negative results. Moreover, the official virus test was not clinically validated due to time pressure and may sometimes react positive to other common coronaviruses.

23. Numerous [internationally renowned experts](#) in the fields of virology, immunology and epidemiology consider the **measures** taken to be [counterproductive](#) and recommend rapid [natural immunization](#) of the general population and protection of risk groups.

24. At no time was there [a medical reason](#) for the closure of **schools**, as the risk of disease and transmission in children is [extremely low](#). There is also [no medical reason](#) for small classes, masks or 'social distancing' rules in schools.

25. Several medical experts [described](#) express coronavirus **vaccines** as [unnecessary](#) or even [dangerous](#). Indeed, the vaccine against the [so-called swine flu](#) of 2009, for example, led to cases of [severe neurological damage](#) and lawsuits in the millions. In the testing of new coronavirus vaccines, too, serious [complications](#) and [failures](#) have already been reported.

26. A global respiratory disease pandemic can indeed extend over [several seasons](#), but many studies of a **"second wave"** are based on [very unrealistic assumptions](#), such as a constant risk of illness and death across all age groups.

27. In several places, nurses described an oftentimes [fatal medical **mismanagement**](#) of Covid patients due to questionable [financial incentives](#) and inappropriate medical protocols.

28. The number of people suffering from **unemployment**, [depression](#) and domestic violence as a result of the measures has reached [historic record levels](#). Several experts predict that the measures will claim [far more lives](#) than the virus itself. According to the UN [1.6 billion people](#) around the world are at immediate risk of losing their livelihood.

29. NSA whistleblower Edward Snowden warned that the "corona crisis" may be used for the [permanent expansion](#) of **global surveillance**. In several parts of the world, the population is being [monitored by drones](#) and facing serious police overreach during lockdowns.

30. A 2019 WHO study on measures against pandemic influenza found that from a medical perspective, **"contact tracing"** is ["not recommended in any circumstances"](#). Nevertheless, contact tracing apps have already [become](#) partially mandatory in [several countries](#). In some countries, such "contact tracing" is carried out directly [by the secret service](#).

See also

1. [On the treatment of Covid-19](#)

2. [Studies on Covid-19 lethality](#)

3. [On the origin of SARS-CoV-2](#)

4. [The evidence on face masks](#)

5. [European Mortality Monitoring](#)