

10 million passengers per day don't need the WHO!

Dr. Wolfgang Wodarg

WHO and the misuse of entrusted power

Dr. Wolfgang Wodarg - www.wodarg.com



MODEL OF SHIP [MARITIME] DECLARATION OF HEALTH
RETAIN: ALL

1973 Hafenaarzt der Hansestadt Hamburg

1. Died someone ?
2. Infectious diseases?
3. More illnesses as usual?
4. Ill people on board now?
5. Was a doctor consulted?
6. Any risks for infections?
7. Any sanitary measures?
8. Any stowaways been found?
9. Are there sick animals on board?



ZV
ZT

**Nostalgic IHR nonsense from the WHO!
Continued from times, when there were no aeroplanes.**

To be completed and submitted to the port of

Name of ship or inland navigation vessel (Nationality)(Flag of vessel)

Tonnage (ship)

Tonnage (inland navigation vessel)

Valid Sanitation Control Exemption/inspection required? Yes No

Has ship/vessel visited an affected area since last visit

List ports of call from commencement of voyage

Upon request of the competent authority, the names of the persons who accompanied the international voyage began or within the names to the attached schedule):

(1) Name

(2) Name

(3) Name

Number of crew members on board

(1) Has any person died on board during the voyage otherwise than as a result of accident? Yes No If yes, state particulars in attached schedule. Total no. of deaths

(2) Is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature? Yes..... No..... If yes, state particulars in attached schedule.

(3) Has the total number of ill passengers during the voyage been greater than normal/expected? Yes No How many ill persons?

(4) Is there any ill person on board now? Yes No If yes, state particulars in attached schedule.

(5) Was a medical practitioner consulted? Yes No If yes, state particulars of medical treatment or advice provided in attached schedule.

(6) Are you aware of any condition on board which may lead to infection or spread of disease? Yes No If yes, state particulars in attached schedule.

(7) Has any sanitary measure (e.g. quarantine, isolation, disinfection or decontamination) been applied on board? Yes No If yes, specify type, place and date

(8) Have any stowaways been found on board? Yes No If yes, where did they join the ship (if known)?

(9) Is there a sick animal or pet on board? Yes No

Note: In the absence of a surgeon, the master should regard the following symptoms as grounds for suspecting the existence of a disease of an infectious nature:

(a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swelling; (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.

(b) with or without fever: (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe diarrhoea; or (iv) recurrent convulsions.

I hereby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true and correct to the best of my knowledge and belief.

Signed.....
Master

Countersigned.....
Ship's Surgeon (if carried)

Date.....

As the successor to the International Health Department of the Rockefeller Foundation (IHD), the WHO was founded in 1948.
About rivalries and cooperation between RF and WHO: A.E. Birn 2013

WHO secretary generals

<u>Brock Chisholm</u>	1948 – 1953
<u>Marcolino Gomes Candau</u>	1953 -1973
<u>Halfdan T. Mahler,</u>	1973 - 1988
<u>Hiroshi Nakajima</u>	1988 – 1998

1989 end of bipolar World Order

<u>Gro Harlem Brundtland</u>	1998 – 2003
<u>Jong-Wook Lee</u>	2003 - <u>2006</u> †
Anders Nordström	2006 - 2007
<u>Margaret Chan</u>	2006 - 2017
<u>Tedros A. Ghebreyesus</u>	2017 - ?



WEF 1989

Focus was put on environmental concerns and, above all, the “greenhouse effect” and its implications. Norwegian Prime Minister Gro Harlem Brundtland called for an “ecological-environmental” summit and offered to host a meeting of government leaders on energy resources.

reframing health

before 1883: **health as a private matter***

after 1900: **health regulated by states***

after 1948: **health as a human right**

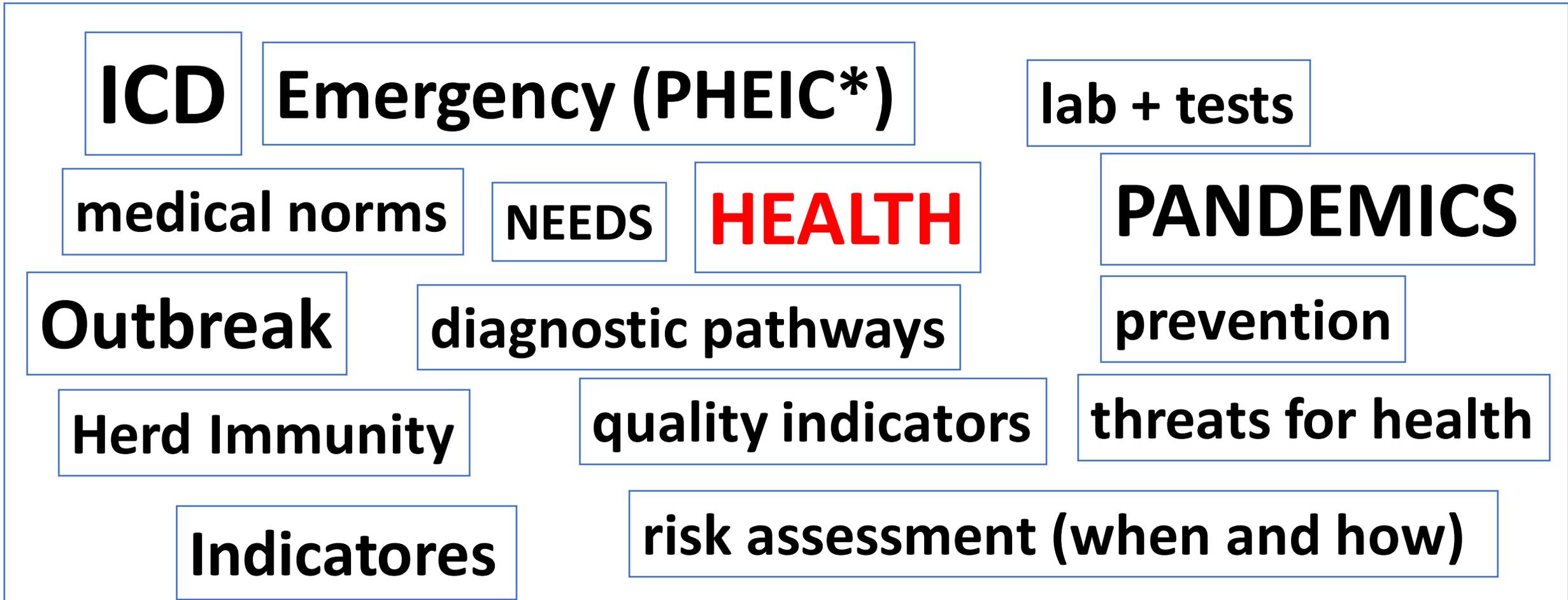
after 1989: **health as a growing market**

since 2020: **health as population control**

* 1881 first health insurance regulations by Bismarck

1907 **International Office of Public Hygiene (OIPH)**, was founded in Paris

WHO – setting norms



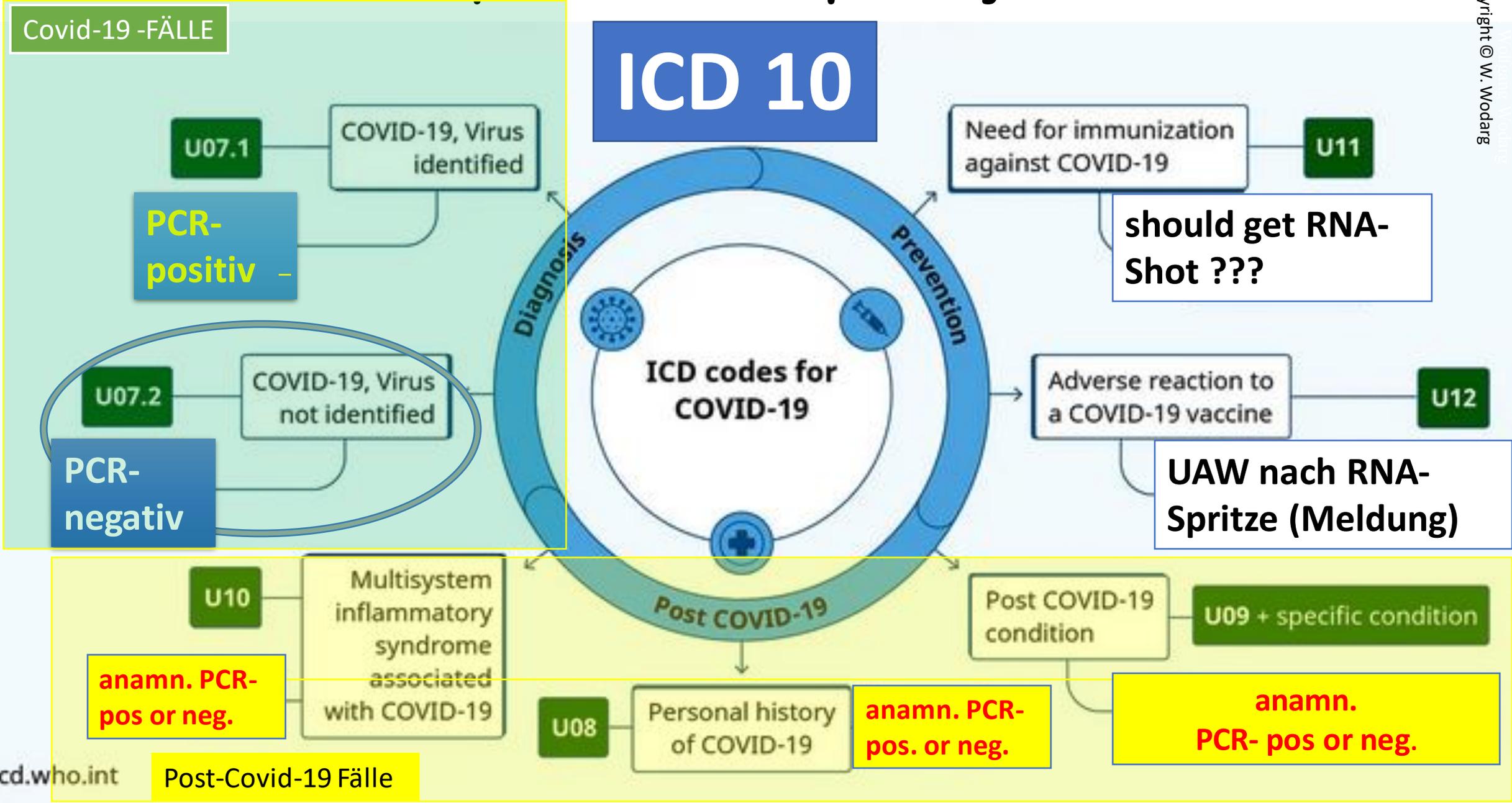
**PHEIC = Public Health Emergency of International Concern*

More patients with lower thresholds

Effekt neuer Grenzwerte auf die Anzahl der Betroffenen

	Wert		Fälle USA		
	vorher	nachher	vorher	nachher	
Diabetes					
Nüchtern-BZ	140	126	11.697.000	13.378.000	+14%
Bluthochdruck	syst 160	140	38.690.000	52.180.000	+35%
	diast 100	90			
Hyperlipidämie					
Cholesterin*	240	200	49.480.000	92.127.000	+86%
Osteoporose					
T-score	-2,5	-2	8.010.000	14.791.000	+85%

planned Intransparency



Daily change

Quelle: <https://www.google.com/search?client=firefox-b-d&q=covid-19+cases+china> abgerufen 16.2.2021, 20:20

New cases ▼



China (Mainland) ▼

All time ▼



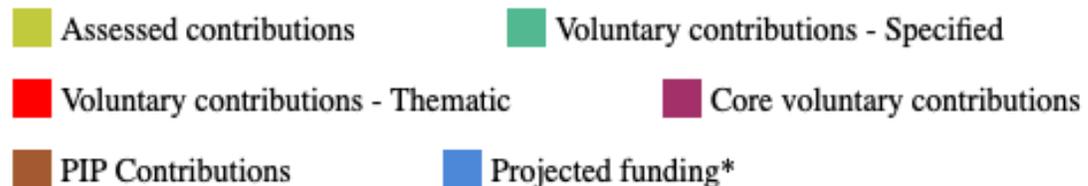
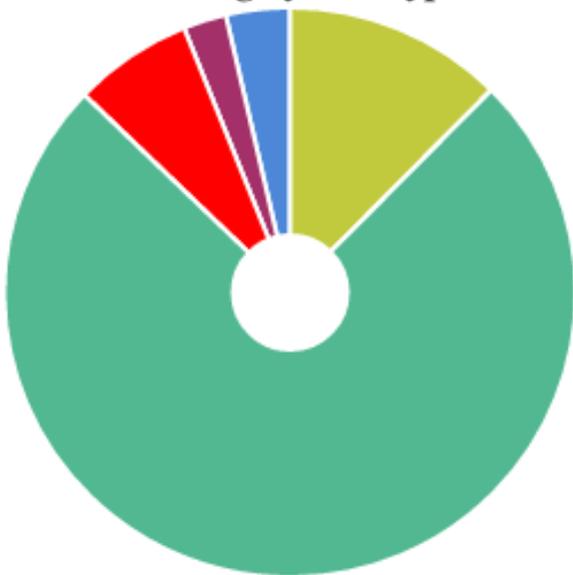
More than 80% earmarked money

By contributor

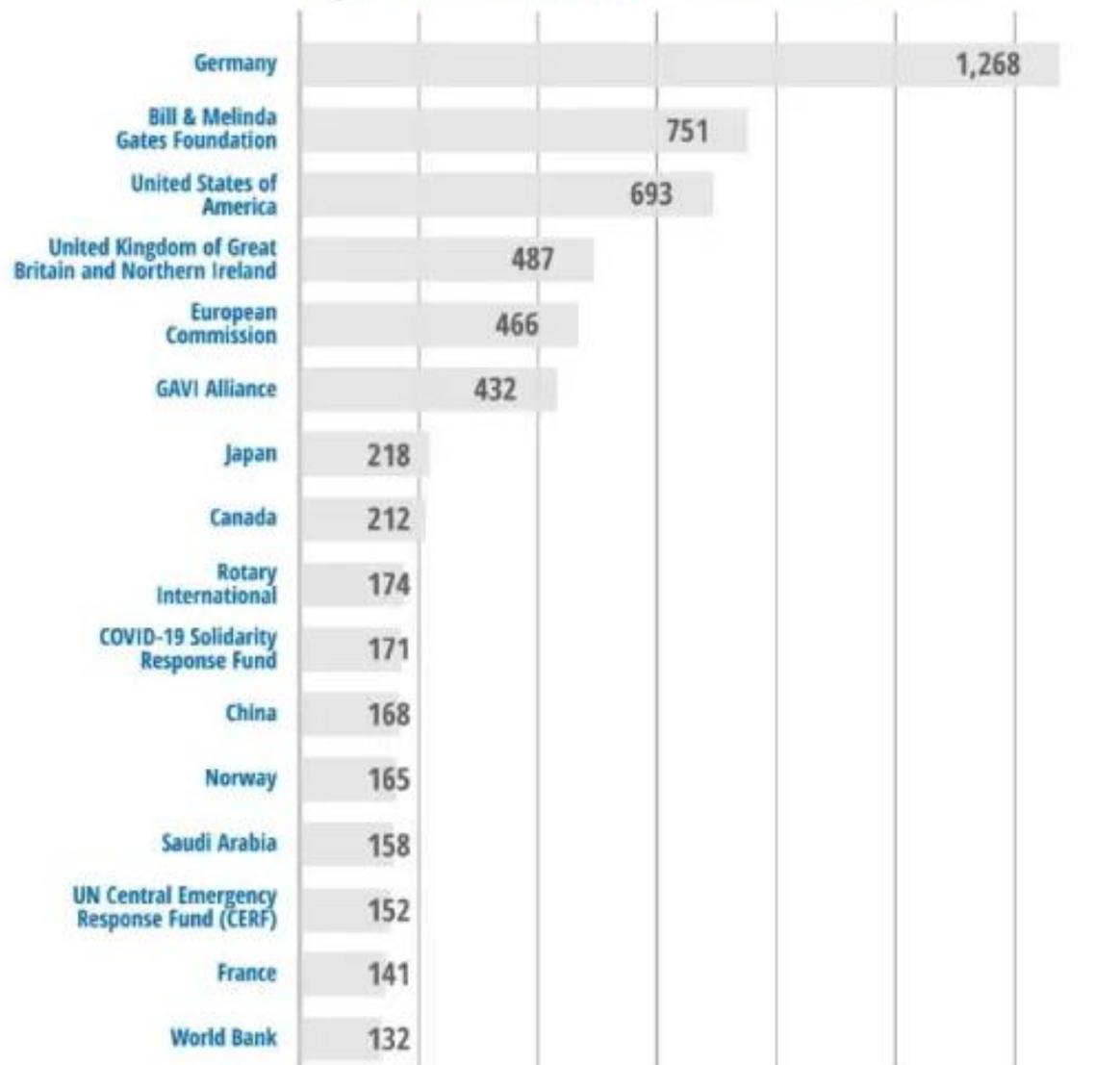
Search contributor

- All Contributors

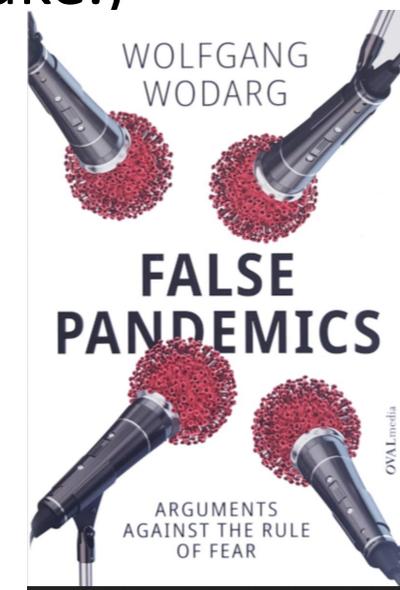
Funding by fund type



Top 20 contributors to WHO (2020 - 2021, US\$ million)



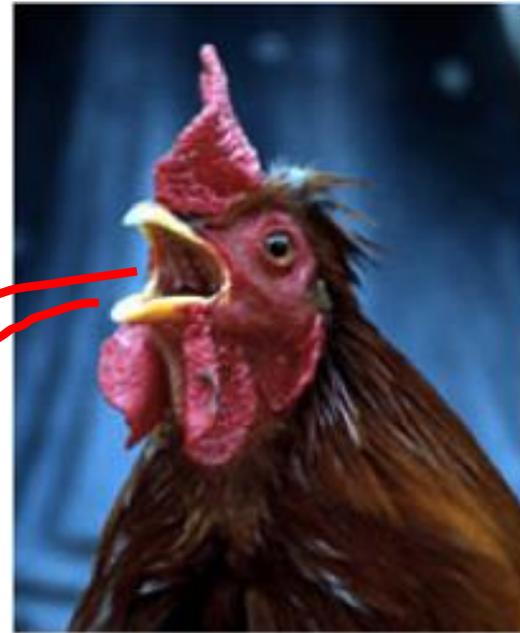
- 1984 HIV never proven to be causal for AIDS, but many deadly therapies
- 2000 BSE from England (bone fat in milk for calves)
- 2002 SARS 1-Outbreak in Guangdong (126Mio Inh., 8000„PCR-cases“ FR10%)
- **2005 H5N1 (Birds Flu / no human cases)**
- **2009 H1N1-“Swine Flu Pandemic“** (La Gloria 2200 Inh.,1Mio pigs)
- 2011 EHEC from vegetable market Hamburg (2.987 cases, 855 HUS, 50 lethal)
- 2014 MERS from dromedaries (2600 PCR-“cases“, 930 lethal)
- **2014-2015 Ebola in Western Africa** (28.639 cases, 11.316 lethal)
- **2016 Zika in Brasil** (many PCR-“cases“, mikrocephalia statistical fake.)
- **2019-2020 Ebola im Osten der Republik Kongo** (1183cases?)
- **2019 SARS-CoV 2** from Hubei (56,5 Mio Inh.)
- **2022 Mpox** here and there (Monkeypox)PCR-Tests
- 2023-2024 Marburg Fever, H5N1, VIRUS -X ???
- **???? NCD-“Pandemics“**



Veterinär K. Stöhr, „Pandemie“-Coordinator WHO 2005 :

" Up to 7 million deaths "
from H5N1

2005



Hahn
© IMSI MasterClips

Tamiflu

MOVERS

Klaus Stöhr, director of the influenza vaccine franchises, Novartis Vaccines and Diagnostics, Cambridge, Massachusetts



2006-07: Senior adviser, Influenza Pandemic Vaccine Development, World Health Organization (WHO), Geneva, Switzerland

2001-06: Coordinator, WHO Global Influenza Programme, Geneva, Switzerland

2003: Coordinator, SARS aetiology and diagnosis, WHO, Geneva, Switzerland

"The last pandemics were caused by animal viruses. We haven't been this close to a pandemic for a long time."

2023, he again warns of bird flu and calls for the rapid the rapid introduction of an RNA "vaccine" against H5N1.

AI and Pandemics H1N1

aus Ferguson et. al.

Table S3: Number of passengers on flights from airports in Mexico, or in greater Mexico city in the months March and April 2009 (24).

Destination country	Flights from airports throughout Mexico			Flights from airports in greater Mexico City		
	March 2009	April 2009	March-April 2009	March 2009	April 2009	March-April 2009
Argentina	13,288	11,321	24,609	10,586	9,970	20,556
Belgium	2,106	3,134	5,240	-	-	-
Brazil	20,861	17,888	38,749	20,579	17,606	38,185

2009

Imperial College
London
Outbreak data

Early US & UK case data (with contacts) gave invaluable insight into transmission.

Data analysed in collaboration with CDC and HPA.

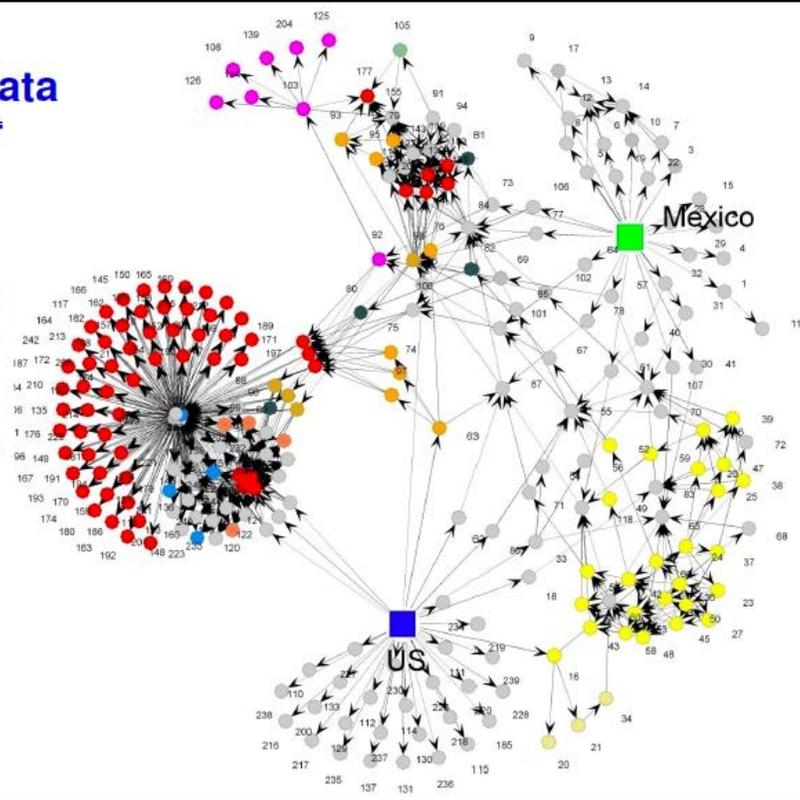
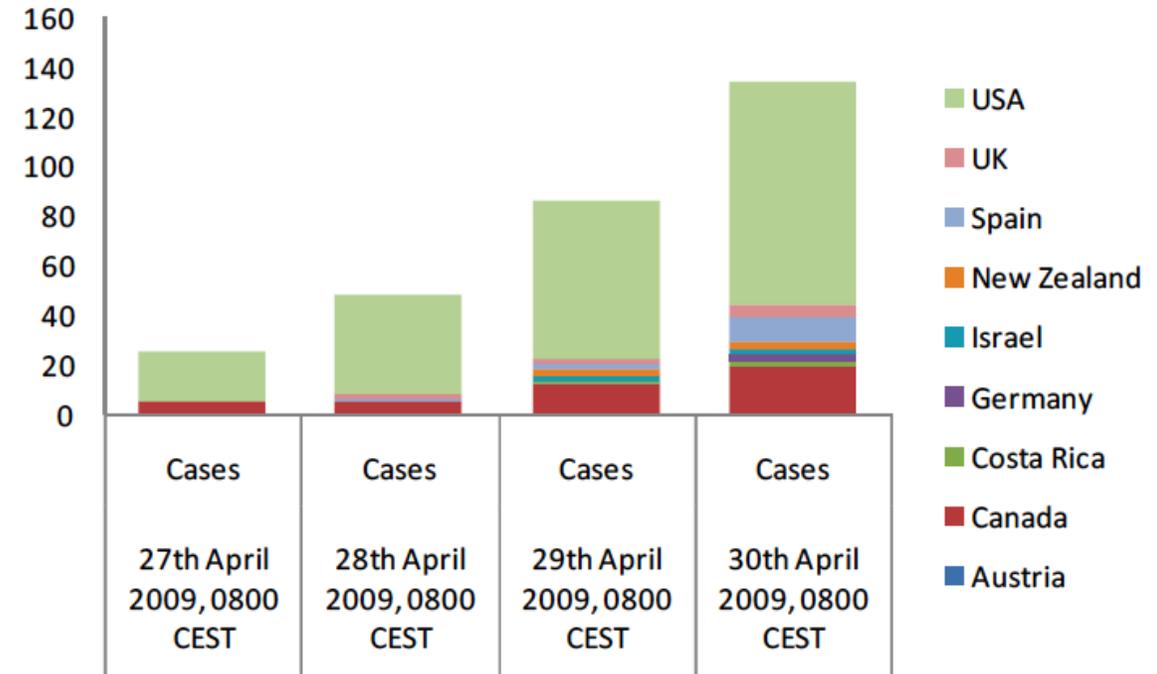


Figure S1: Confirmed cases by country (see Table S1) up to 30th April 2009.



USA	1,338,363	1,136,534	2,474,897	272,684	272,684	545,368
Venezuela	4,650	4,500	9,150	4,650	4,500	9,150
Total	1,674,381	1,434,929	3,109,310	519,945	492,708	1,012,653

7. Bekanntgabe einer Pandemie

from the secret german contract with GSK

Bekanntgabe einer Influenza-Pandemie durch die Weltgesundheitsorganisation (WHO) bei Erreichen der Stufe 6 und Identifizierung und Bekanntgabe des relevanten Virustyps.

8. Ende einer Pandemie

Verkündung des Endes einer Influenza-Pandemie durch die Weltgesundheitsorganisation (WHO) und Herunterstufen von Stufe 6.

9. Akute Pandemiegefahr

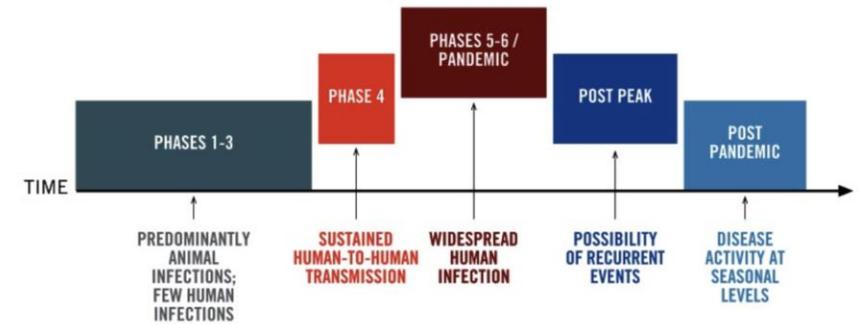
Phase, in der eine Pandemie durch die WHO bekannt gegeben wurde (Stufe 6) oder in der der Ausbruch einer Pandemie jederzeit zu erwarten ist. Dieser Zeitpunkt kann ab Stufe 5 vorliegen und wird wie folgt bestimmt:

2009

CHANGING the definition

Change of pandemic influenza definition (around 1 May 09)

- “...resulting in epidemics worldwide with **enormous numbers of deaths and illness**” vanishes
- “Current” definition emphasis on new virus and spread
- Why change? “It was a mistake, and we apologize for the confusion.” “(That definition) was put up a while ago and paints a rather bleak picture and could be very scary.” The correct definition is that “pandemic” indicates outbreaks in at least two of the regions into which WHO divides the world, but has nothing to do with the severity of the illnesses or the number of deaths” (Natalie Boudou 4th of May 2009)
- And: “We wrote that definition [i.e. the one pre-dating the 4th of May 2009] with avian flu in mind” (Dr Hartl 7 Feb 2010)
- Strange mistake since all WHO pandemic docs (20004-2009) report the pre-4th of May 09 definition and it makes no mention of avian influenza



Dr. Wolfgang Wodarg

by Dr. Tom Jefferson (2010,) (Cochrane)
PACE Subcommittee on Health



Council of Europe

Doc. 12110
18 December 2009

Faked Pandemics - a threat for health

Motion for a recommendation
presented by Mr Wodarg and others

This motion has not been discussed in the Assembly and commits only the members who have signed it

In order to promote their patented drugs and vaccines against flu, pharmaceutical companies have influenced scientists and official agencies, responsible for public health standards, to alarm governments worldwide. They have made them squander tight health care resources for inefficient vaccine strategies and needlessly exposed millions of healthy people to the risk of unknown side-effects of insufficiently tested vaccines.

The "birds-flu"-campaign (2005/06) combined with the "swine-flu"-campaign seem to have caused a great deal of damage not only to some vaccinated patients and to public health budgets, but also to the credibility and accountability of important international health agencies. The definition of an alarming pandemic must not be under the influence of drug-sellers.

The member states of the Council of Europe should ask for immediate investigations on the consequences at national as well as European level.



Published 3 June 2010, doi:10.1136/bmj.c2912
Cite this as: *BMJ* 2010;340:c2912

Feature **BMJ** Conflicts of Interest

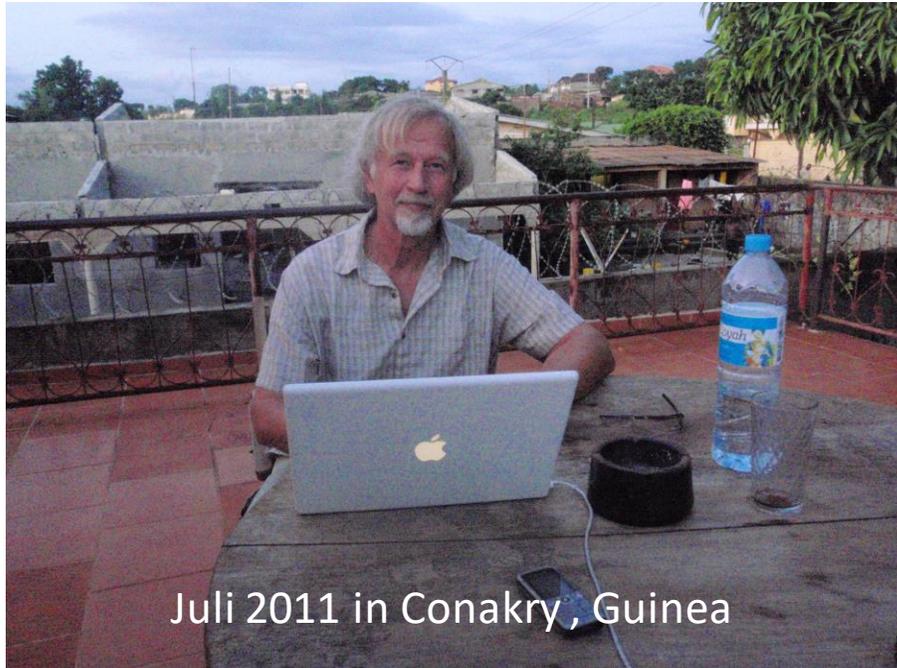
WHO and the pandemic flu "conspiracies"

Deborah Cohen, features editor, *BMJ*, Philip Carter, journalist, *The Bureau of Investigative Journalism*, London

dcohen@bmj.com

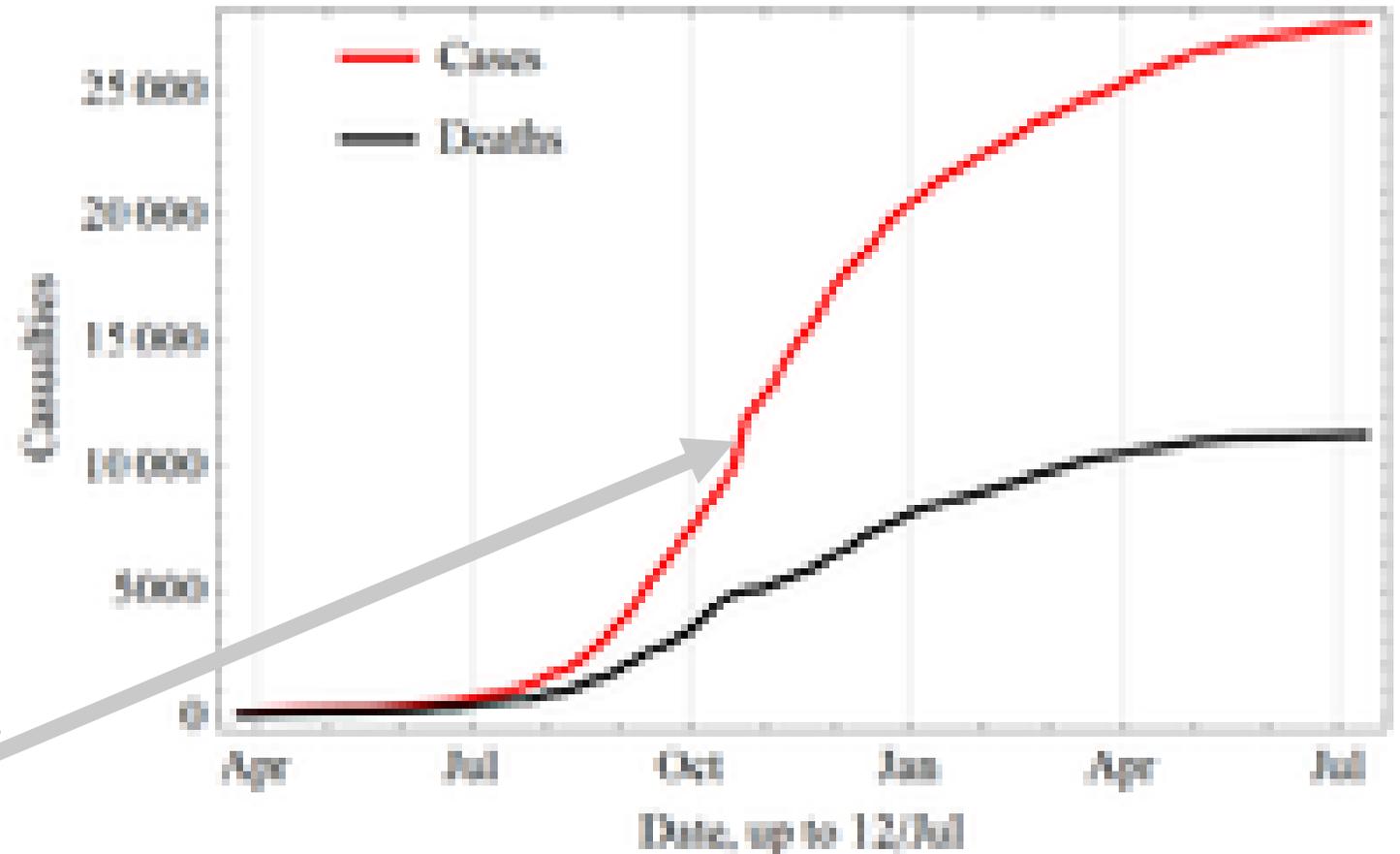
Key scientists advising the World Health Organization on planning for an influenza pandemic had done paid work for pharmaceutical firms that stood to gain from the guidance they were preparing. These conflicts of interest have never been publicly disclosed by WHO, and WHO has dismissed inquiries into its handling of the AH1N1 pandemic as "conspiracy theories." **Deborah Cohen** and **Philip Carter** investigate

EBOLA Westafrika (2014 -2016)



The German Embassy in Conakry:
Germany will do nothing, the WHO has taken over.

In November 2014 WHO declared, that the Incidence Rate for Guinea is seen as stable. [57][58]



https://de.wikipedia.org/wiki/Ebolafieber-Epidemie_2014_bis_2016

EBOLA Vektor-studies in Westafrika (2014 -2016)

Merck Sharp & Dohme provided the vaccine used in the trial.

„We would like to acknowledge the support of the following organisations:

Wellcome Trust,
UK Dep. of International Development,
Guinean Ministry of Health,
Norwegian Ministry of Foreign Affairs,
US Department of Defense,
Public Health Agency of Canada,
Swiss Agency for Therapeutic Products,
Bill & Melinda Gates Foundation,
Health Canada,
European Commission „

Source:

Lancet 2015; 386: 857–66

Published Online: July 31, 2015

[http://dx.doi.org/10.1016/S0140-6736\(15\)61117-5](http://dx.doi.org/10.1016/S0140-6736(15)61117-5)

Ebola study area: cluster vaccination
(immediate and delayed vaccinations)

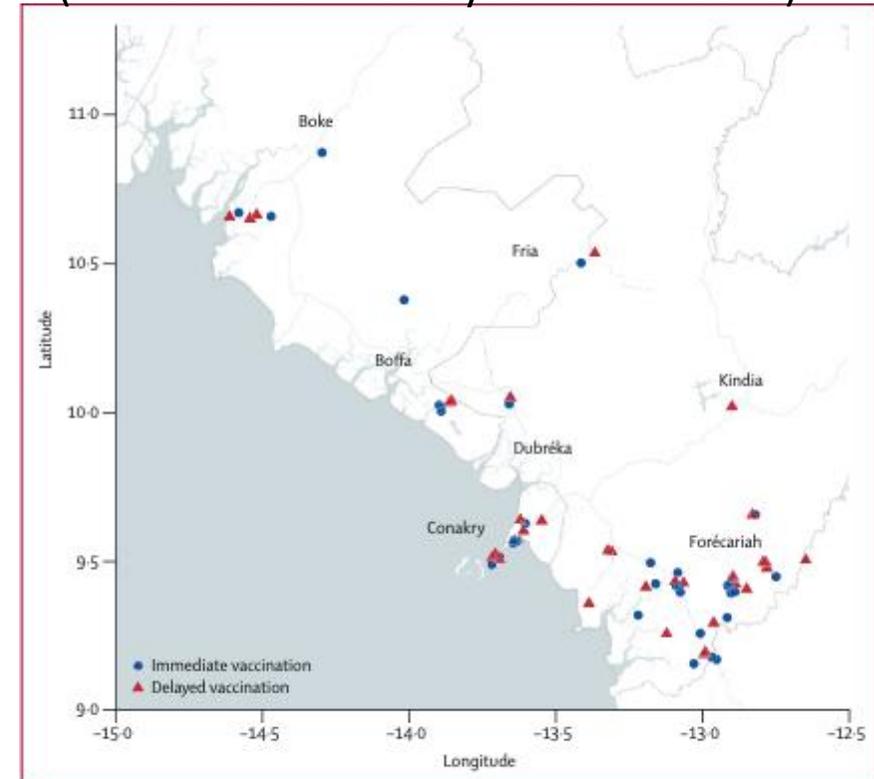


Figure 1: Study area of Ebola çu Suffit cluster vaccination trial in Basse-Guinée



Covid-19

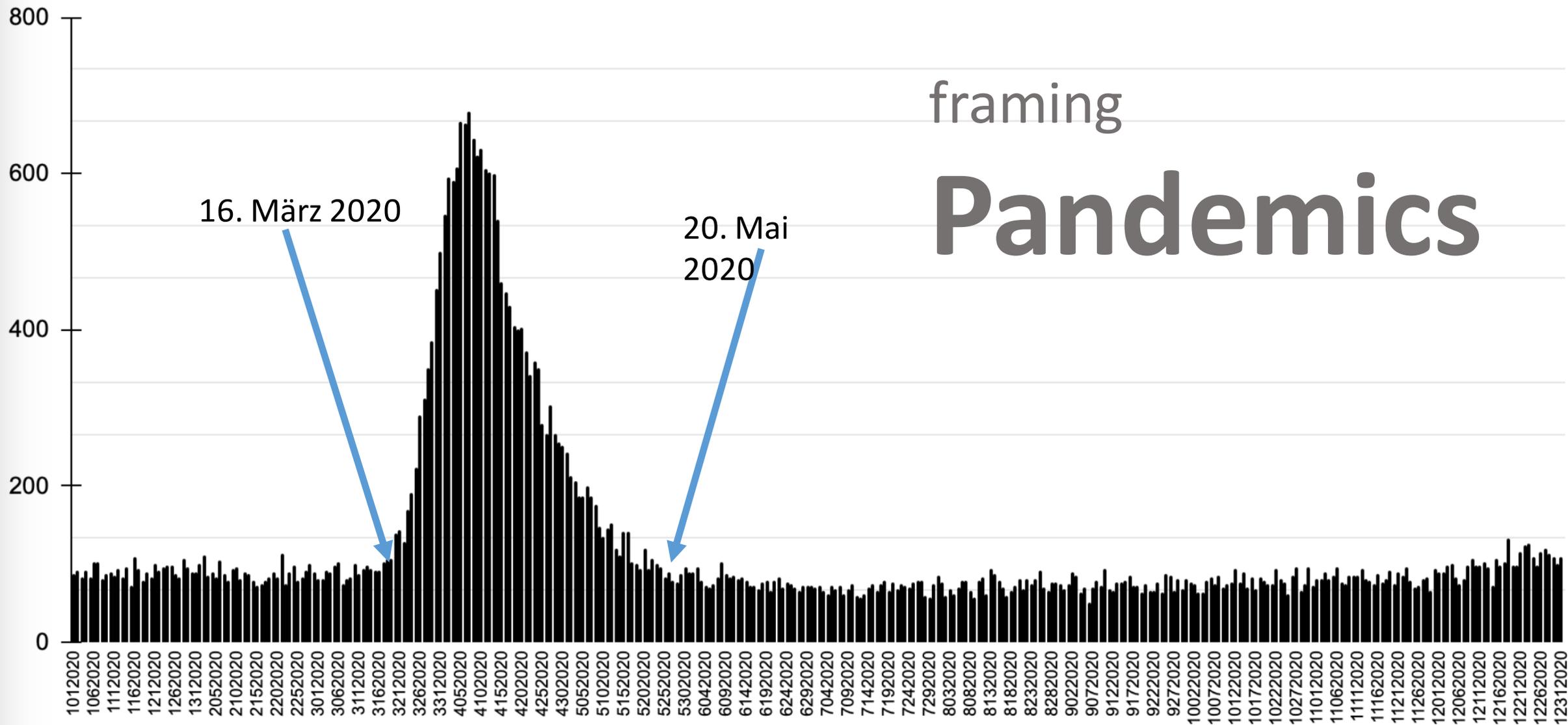
another fake pandemic

Was passiert gerade in New York und Italien?



New York City Daily Deaths in Hospitals (Inpatient/ED/Outpatient), 1/1/2020 - 12/31/2020

Source: NYC DOHMH | Obtained via FOIL | Jessica Hockett, PhD

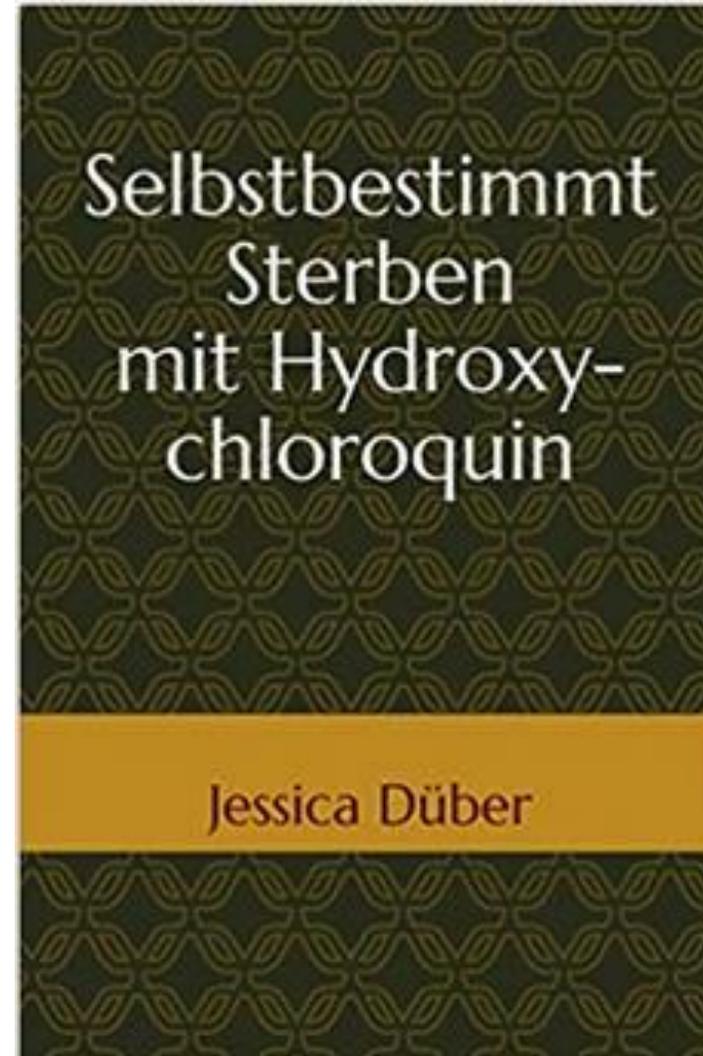


Homicide by Hydroxychloroquine

On 1 April 2020, UK Chief Medical Adviser Chris Whitty wrote to NHS colleagues asking them to make every effort to include COVID-19 patients in national urgent clinical trials:

PRINCIPLE (Risikopatienten in der Primärversorgung).
RECOVERY (Studie im Krankenhaus)
REMAP-CAP (Studie mit kritisch kranken Patienten)

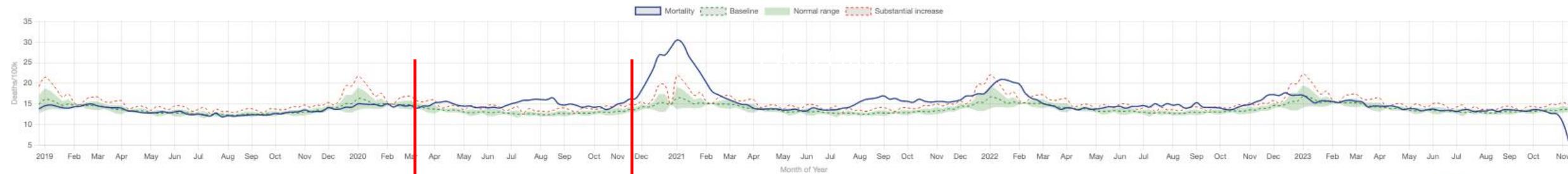
In the RECOVERY study and in the REMAP-CAP study, an extremely high and potentially lethal dose of HCQ was used: One patient received 2,400 mg in the first 24 hours of treatment.



Mortality [California]

Weekly, All Causes

USMortality.com



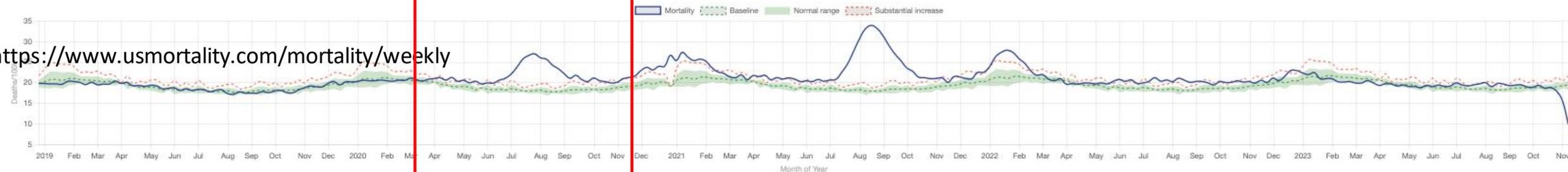
Sources: CDC.gov, Census.gov

Maximize Show Months | CSV | JSON | ▲

Mortality [Florida]

Weekly, All Causes

USMortality.com



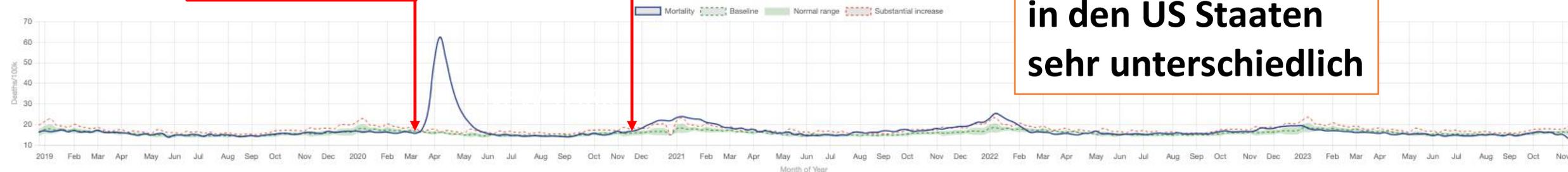
Sources: CDC.gov, Census.gov

Maximize Show Months | CSV | JSON | ▲

Mortality [New York]

Weekly, All Causes

USMortality.com



Sources: CDC.gov, Census.gov

Maximize Show Months | CSV | JSON | ▲

WHO-Ausrufung einer Pandemie

Beginn der RNA-Spritzen

Gesamtmortalität in den US Staaten sehr unterschiedlich

<https://www.usmortality.com/mortality/weekly>

COVID-19 rapid guideline: managing symptoms (including at the end of life) in the community

NICE guideline [NG163] Published: 03 April 2020
Last updated: 13 October 2020

COVID-19 rapid guideline: managing symptoms (including at the end of life) in the community (NG163)

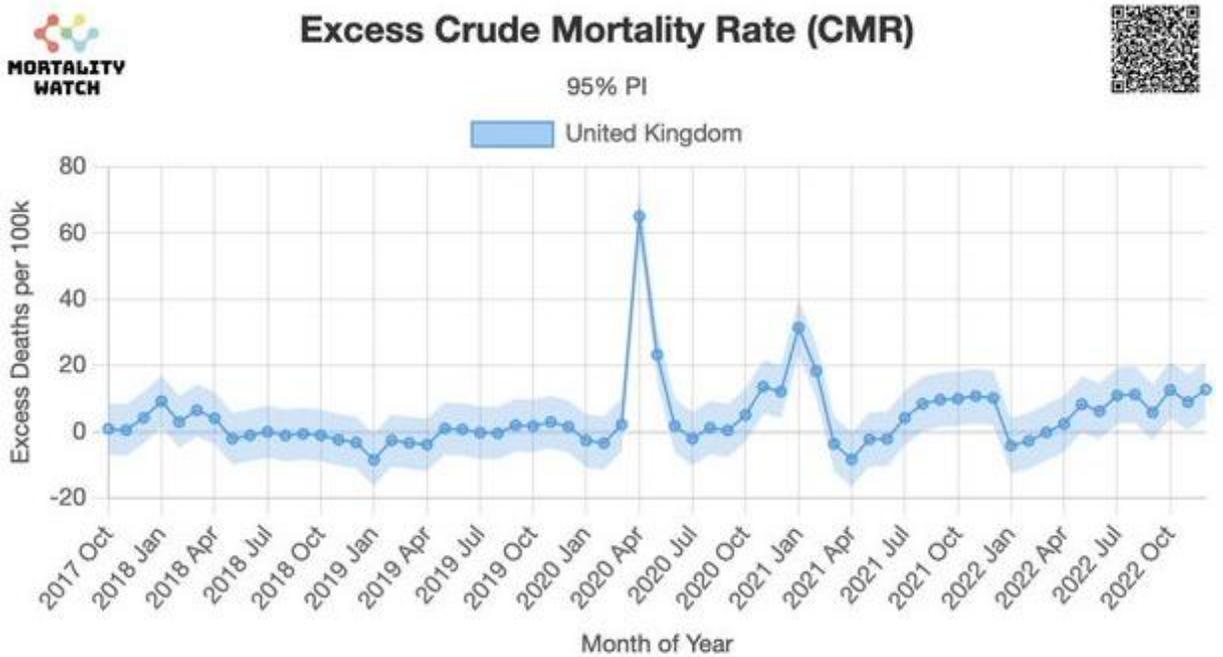
community.

6.4 Identify and treat reversible causes of breathlessness, for example pulmonary oedema.

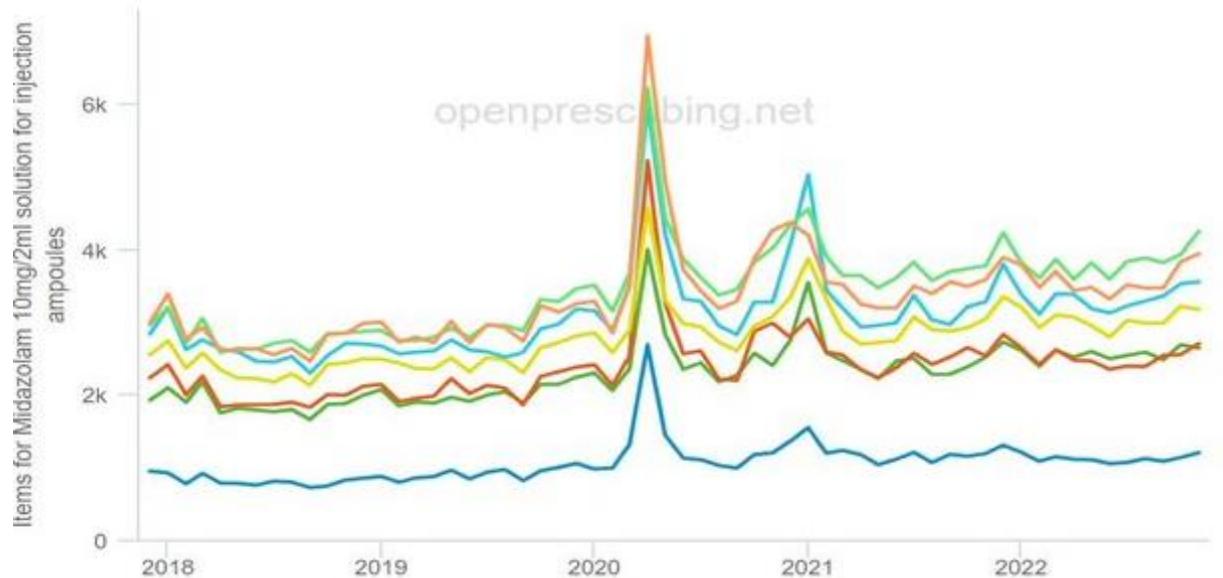
6.5 Consider an opioid and benzodiazepine combination (see tables 4 and 5) for patients with COVID-19 who:

- are at the end of life and
- have moderate to severe breathlessness and
- are distressed.

Consider concomitant use of an antiemetic and a regular stimulant laxative. At the time of publication (April 2020), opioids and benzodiazepines did not have a UK marketing authorisation for moderate to severe breathlessness (see the [General Medical Council's guidance on prescribing unlicensed medicines](#) for further information).



Items for Midazolam 10mg/2ml solution for injection ampoules by all regional teams



MEMBERS OF THE GLOBAL PREPAREDNESS MONITORING BOARD + 8 weitere Mitglieder

2019

2020

2021-2023

2023

GPMB directors in the background 2019 -2020



H.E. Dr Gro Harlem Brundtland
Co-Chair, GPMB; Former Prime Minister, Norway and Former Director-General, World Health Organization



Dr Victor Dzau
President, The National Academy of Medicine, USA



Dr Chris Elias
President, Global Development Program, Bill & Melinda Gates Foundation, USA



Sir Jeremy Farrar
Director, Wellcome Trust, UK



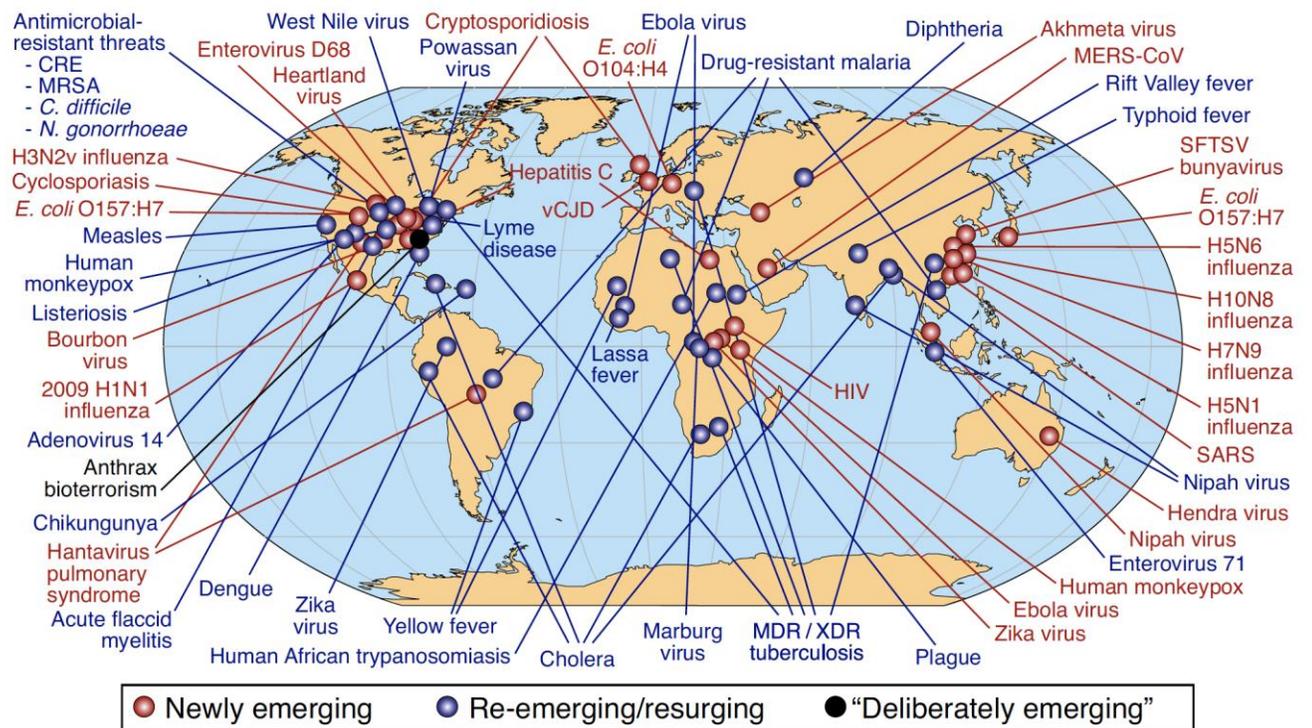
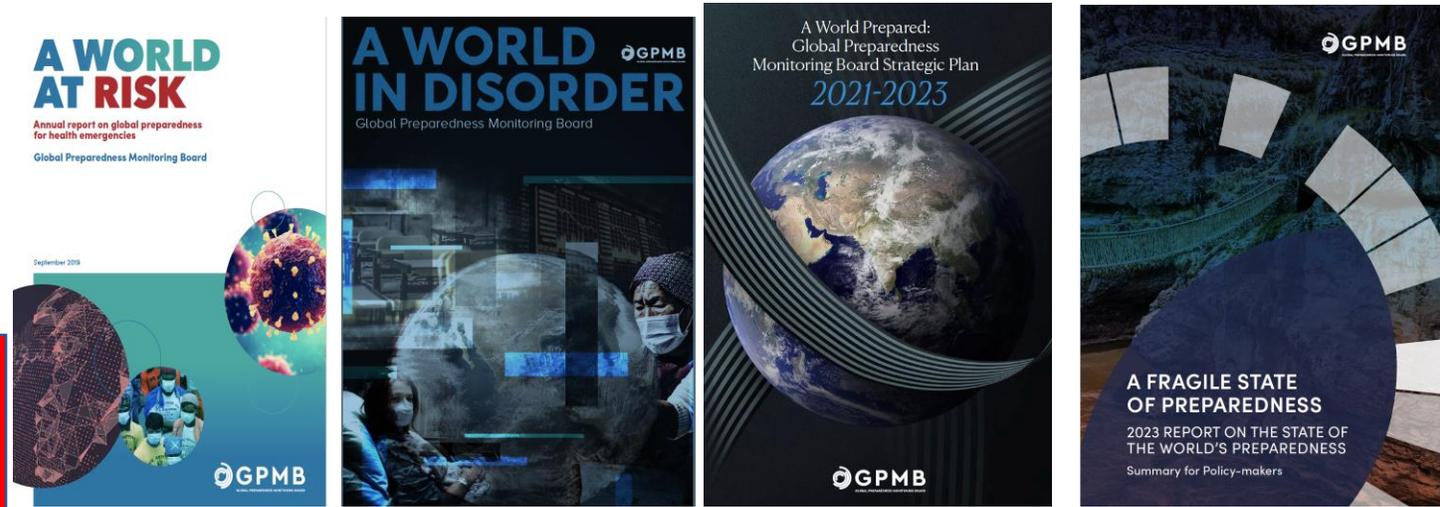
Dr Anthony S. Fauci
Director, National Institute of Allergy and Infectious Diseases, USA



Ms Henrietta Fore
Executive Director, UNICEF



Dr George F. Gao
Director-General, Chinese Center for Disease Control and Prevention, People's Republic of China



Future PHEIC with „Non Communicable Diseases“

<https://ncdalliance.org/>

Preparing several more Billion Dollar markets.

Ozempic, Wegovy & Co against Adipositas now cost around 300€ monthly.

Accelerating action on NCDs to promote health, protect rights and save lives

Our civil society network includes +67 national and regional alliances and over 300 members in 80 countries dedicated to improving noncommunicable diseases prevention and control worldwide.

GET INVOLVED ▶

NEW DIGITAL PUBLICATION

The Global NCD Agenda for Resilience and Recovery from COVID-19 offers leaders and policymakers 12 win-win solutions to build back fairer.

Every year 41 MILLION PEOPLE die from NCDs

Almost 2/3 of NCDs deaths are linked to

tobacco use, harmful use of alcohol, unhealthy diets

Pillars

- *Governance*: **Redefine priorities and power and measure what matters**
- *Prevention*: Prioritise health as a path to **preparedness**
- *Health systems*: Fairer and fit for the future

Recommendations

1. **Include NCDs in COVID-19 response, recovery, and preparedness plans**
2. Involve the community in decision-making
3. Rethink the investment case for NCDs, **putting a value on security and equity**
4. **Redefine how health security and pandemic preparedness is measured**
5. Redress conflicts of interest and power imbalances
6. Pivot to prevention
7. Combat inequalities through better social protection
8. **Integrate NCD services into the pandemic response and beyond**
9. Strengthen health services and primary care at the community level
10. **Anchor innovations in data and deployment of digital technologies**
11. Resolve bottlenecks in supply chains
12. Facilitate and support local production of essential NCD medicines

Global Conference for Media Freedom

London, 10. - 11.7.2019

„... a global alliance for integrity in news“ united in fighting missinformation



Speech by Tony Hall, Director-General of the BBC to the FCO Global Conference on Media Freedom on Thursday 11 July 2019.

Published: 11 July 2019



“I’m determined that we use that unique reach and trusted voice to lead the way - to create a global alliance for integrity in news. We’re ready to do even more to help promote freedom and democracy worldwide. We want to play our part to the full at the heart of this critical campaign.”

— Tony Hall

1. Multi-source surveillance

Event-based surveillance

Surveillance in sentinel populations

Wastewater or environmental surveillance

Sero-surveillance (antibody levels against infectious diseases.) (AIDS !)

Surveillance in animal populations.

Support the enhancement of surveillance using a One Health (with FAO etc.).

„ONE Health“

2. diagnostics, therapeutics and vaccines capacities

Genomic sequencing

Support authorization of diagnostics, therapeutics and vaccines

Expand the manufacturing capacity of diagnostics, therapeutics and vaccines

Improve efforts to increase COVID-19 vaccination coverage (->ID 2020)

3. Infodemic management

Address vaccine misinformation and disinformation

„ONE Health“

You can find any microbes anytime in the sewage!

**PANDEMIE?
Jetzt sucht
man sie
im Abwasser.
Dort findet
sich immer
was... ;-)**

ABWASSER ALS INFORMATIONSQUELLE
VIREN, BAKTERIEN & CO
FÜR DIE GESUNDHEIT DER BEVÖLKERUNG



Die Abwasserüberwachung wird in Deutschland ergänzend zu bestehenden Systemen für die Krankheitsüberwachung genutzt. Ziel ist es u.a., die Verbreitung von Infektionskrankheiten einzuschätzen, um Maßnahmen zum Schutz der Bevölkerung ergreifen zu können. Abwasserüberwachung kann helfen, Ausbrüche zu erkennen, ihr Ausmaß zu beurteilen und ihren Ursprung aufzudecken.

ERREGER AUS DEM ABWASSER IN DEUTSCHLAND – EINE AUSWAHL

COVID-19

Das Umweltbundesamt und das Robert Koch-Institut erfassen im Vorhaben AMELAG, ob und wie viel SARS-CoV-2-Viren im Abwasser vorkommen. Ziel ist es, die lokale Infektionslage und die Verbreitung von Virusvarianten zu beurteilen.

Grippe

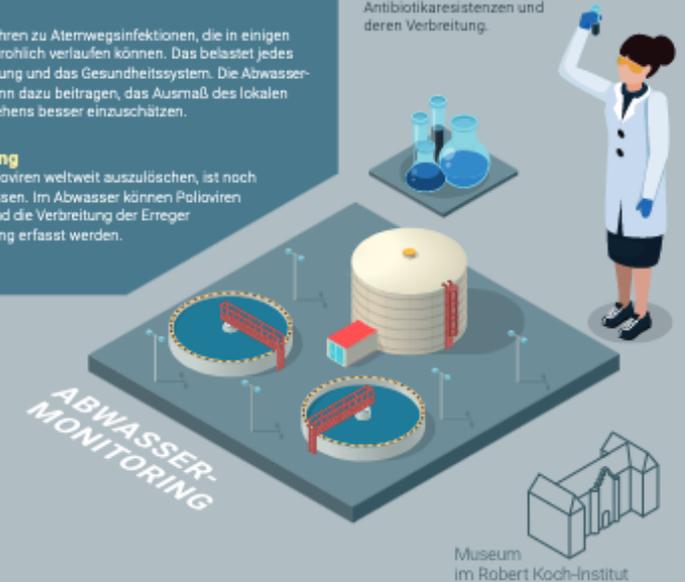
Influenzaviren führen zu Atemwegsinfektionen, die in einigen Fällen lebensbedrohlich verlaufen können. Das belastet jedes Jahr die Bevölkerung und das Gesundheitssystem. Die Abwasserüberwachung kann dazu beitragen, das Ausmaß des lokalen Infektionsgeschehens besser einzuschätzen.

Kinderlähmung

Die Aufgabe, Polioviren weltweit auszulöschen, ist noch nicht abgeschlossen. Im Abwasser können Polioviren nachgewiesen und die Verbreitung der Erreger der Kinderlähmung erfasst werden.

Weitere Erreger

In zahlreichen Forschungsprojekten werden weitere Infektionserreger auf Eignung für eine Abwasserüberwachung überprüft. Dies sind neben verschiedenen Viren auch Bakterien und Pilze. Von besonderem Interesse sind zudem Antibiotikaresistenzen und deren Verbreitung.



Stand: Oktober 2023, Grafik: gabelst-groener.de, DOI: 10.25546/11737



Weitere
Informationen
[www.rki.de/
abwassersurveillance](http://www.rki.de/abwassersurveillance)

War against „X“ is declared elsewhere

DARPA

Biodefence

Grippe-Attacke

Krankheitsausrottung

countermeasures

Biozid

Antigen

DOD

Biowaffen

Killerviren

Antibiotika-Bombe

PHETIC

Schutz - Impfen

Impfpistole

biologischer Kriegsführung

Operation Warp Speed Goes on Offense Against COVID-19

Dec. 19, 2020 | By [Jim Garamone](#), DOD News | [f](#) [t](#) [r](#)

Angriff der Mikroben

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Gain of Function Labor

With vaccines going into arms across the nation, Operation Warp Speed is on the offense against the coronavirus pandemic that is attacking the United States, Army Gen. Gus Perna, the chief operating officer of the effort, said.

Infektionsbekämpfung

Resistenz

Biologische Kampfstoffe

Sterilisation

Desinfektionskolonne



EUA

Emergency Use Authorisation

The US government itself defines what constitutes an emergency and then has special legal rights.

In the war against the virus, it can override all safety rules for medicines and other medical goods.

Declarations of a Public Health Emergency

The Secretary of the Department of Health and Human Services (HHS) may, under section 319 of the Public Health Service (PHS) Act determine that: a) a disease or disorder presents a public health emergency; or b) that a public health emergency, including significant outbreaks of infectious disease or bioterrorist attacks, otherwise exists.

Duration and Notification: The declaration lasts for the duration of the emergency or 90 days, but may be extended by the Secretary. [Learn More >>](#)

Legal Authorities: Public Health Actions

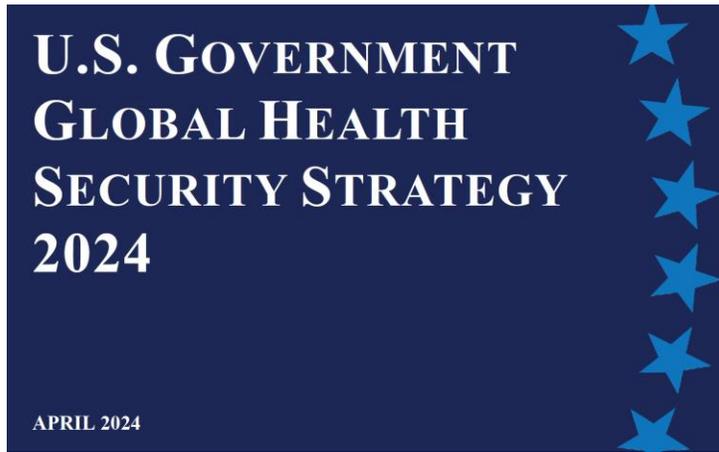
[Declarations of a Public Health Emergency](#)

[Public Health Emergency Determinations to Support an Emergency Use Authorization](#)

[Overview and List of Determinations](#)

[Emergency Use Authorizations](#)

- no prescribed standards for quality control during production,
 - no inspections of the manufacturing processes,
 - no ban on large variations between batches,
 - no ban on adulteration
 - no obligation to comply with current good manufacturing practice.
- EUA products, even if they are not regulated and not standardised, "must not be considered adulterated or misbranded".
- [https://uscode.house.gov/view.xhtml?req=\(title:21%20section:360bbb-3a%20edition:prelim\)](https://uscode.house.gov/view.xhtml?req=(title:21%20section:360bbb-3a%20edition:prelim))



USA

EU



With strong support from Congress, we also championed the **creation of the Pandemic Fund**, a new international body that has already catalyzed \$2 billion in financing from 27 contributors, including countries, foundations, and philanthropies, to build stronger global health security capabilities. **We are working to make life-saving medicines and vaccines more rapidly available in health emergencies, including through supporting Gavi, the Vaccine Alliance and the Coalition for Epidemic Preparedness Innovations.** ..., scale up lending for pandemic prevention, preparedness, and response because health security, economic security, climate security, and national security are all related.

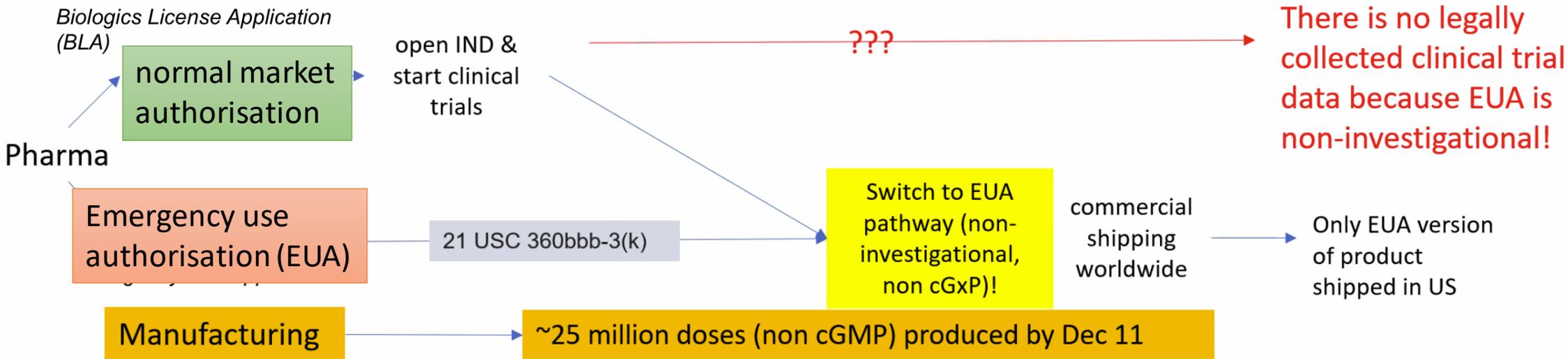
- HERA European **Health Emergency Response Authority** (11/20)
- More capacity for surveillance, testing, contact tracing, laboratories, staff training and coordinated "risk and crisis communication"
- MyHealth@EU **digital surveillance** platform
- Surveillance criteria are vague and can be arbitrarily extended, even preventively
- Monitoring of all possible environmental, climatic and biological factors
- PCR remains the first line instrument for risk detection (PCR 4 All)
- Digital Services Act as a gatekeeper against "disinformation"

Timeline of Covid-19 shots (Pfizer)



HHS/ASPR ————— PHE and PREP Act declarations —————>

FDA
 Temporary "emergency" Covid-19 vax Guidance
 EUA issued
 "BLA Approval" (a fake)



Author - Sasha Latypova



military countermeasures against „SARS-CoV“

At the beginning of May 2022, the Centre for Pandemic Vaccines and Therapeutics (ZEPAI) at the Paul-Ehrlich-Institut took over the task of actively managing the pandemic vaccine supply for the population from the German Armed Forces.

During the „pandemic“, the Bundeswehr had previously taken on this role.

<https://www.pei.de/DE/newsroom/hp-meldungen/2022/220502-zepai-uebernimmt-steuerung-versorgung-pandemieimpfstoffe.html?nn=350690>



Von links nach rechts: Prof. Isabelle Bekeredjian-Ding (Kommissarische Leiterin des ZEPAI), Dr. Gesa Mieke-Nordmeyer (Leiterin der Abteilung für Sozial-, Gesundheits-, Arbeitsmarkt-, Umwelt- und Gesellschaftspolitik im Bundeskanzleramt), Generalmajor Carsten Breuer (Leiter des Corona-Krisenstabs im Bundeskanzleramt).
Quelle: B.Morgenroth/Paul-Ehrlich-Institut



TITEL Pandemic Preparedness

Effektive Strukturen schaffen

What is Disease X? Why are UK scientists working on a vaccine to prevent a new pandemic from unknown disease?

The Daily Mail
Published: 15:06 BST, 7 August 2023

- UK experts are working on a project at a top-secret government laboratory
- They are developing prototype vaccines to tackle 'Disease X' when it hits
- **READ MORE:** [Scientists at Porton Down preparing for bird flu to jump to humans](#)

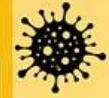


The Vaccine Development and Evaluation Centre (VDEC) (pictured) is based at the UK Health and Security Agency (UKHSA) science and defence technology campus Porton Down, near Salisbury in Wiltshire

WHO'S BIGGEST PANDEMIC THREATS



COVID-19



Crimean-Congo haemorrhagic fever



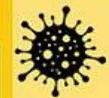
Ebola virus disease and Marburg virus disease



Lassa fever



Middle East respiratory syndrome coronavirus (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS)



Nipah and henipaviral diseases



Rift Valley fever



Zika



An as yet unknown "Disease X"

It was not the virus!

GoF microorganisms cannot spread globally.

But it is possible to intoxicate people in many different ways

Laboratory-Acquired Infections (LAI)

Accidental Pathogen Escape from Laboratory Settings (APELS)

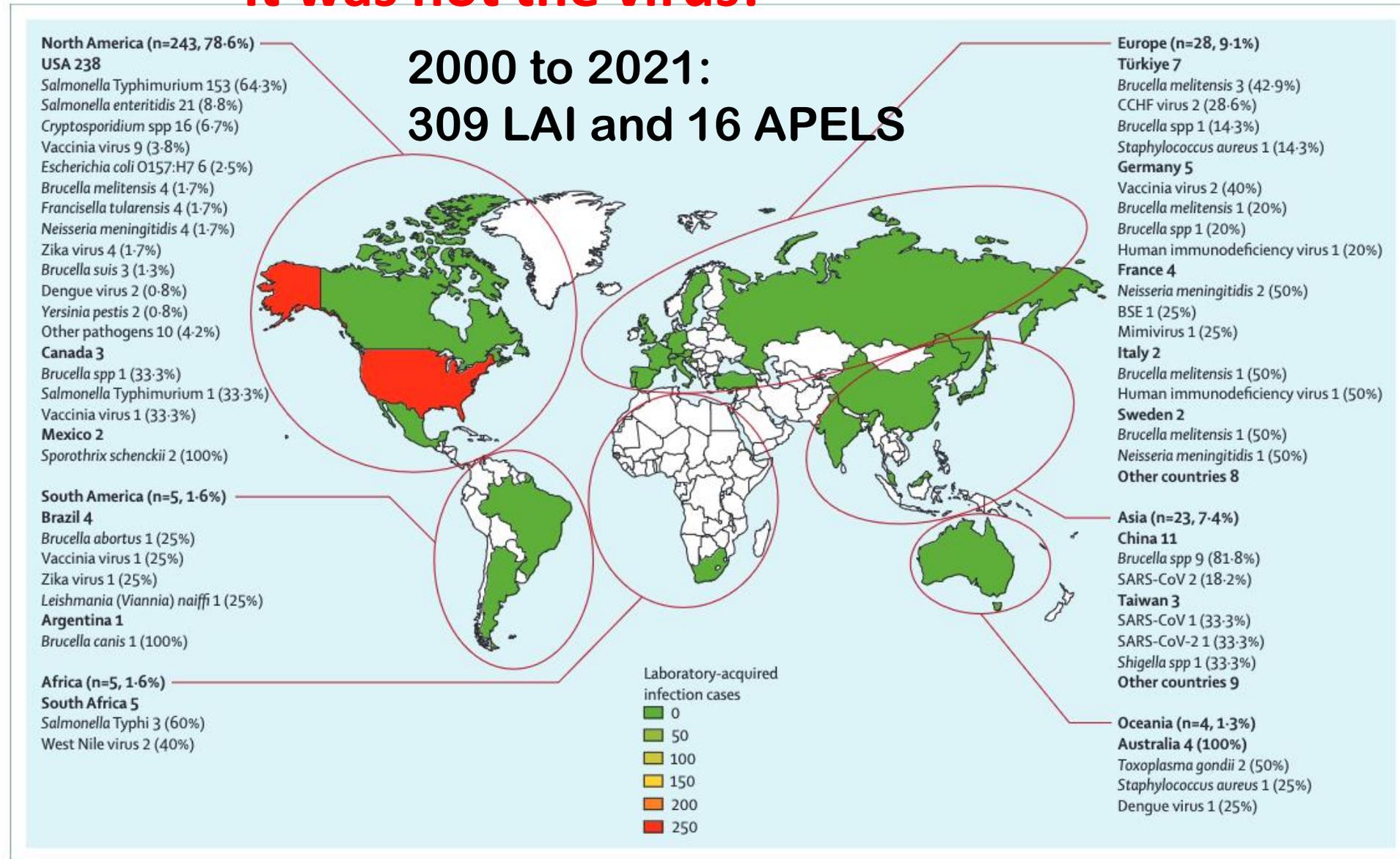


Figure 1: Laboratory-acquired infection case reports, including causal pathogens for each geographical region for the period from 2000 to 2021. Note that in 1 instance the geographic location of the LAI case was not stated.

<https://www.thelancet.com/action/showPdf?pii=S2666-5247%2823%2900319-1>

- 59 x
- 1 x
- 1 x
- 1 x
- 2 x
- 15 x
- 3 x
- 2 x
- 3 x
- 2 x
- 1 x
- 1 x
- 4 x
- 1 x
- 7 x
- 2 x
- 1 x
- 1 x
- 3 x
- 1 x
- 4 x
- 2 x
- 1 x
- 2 x

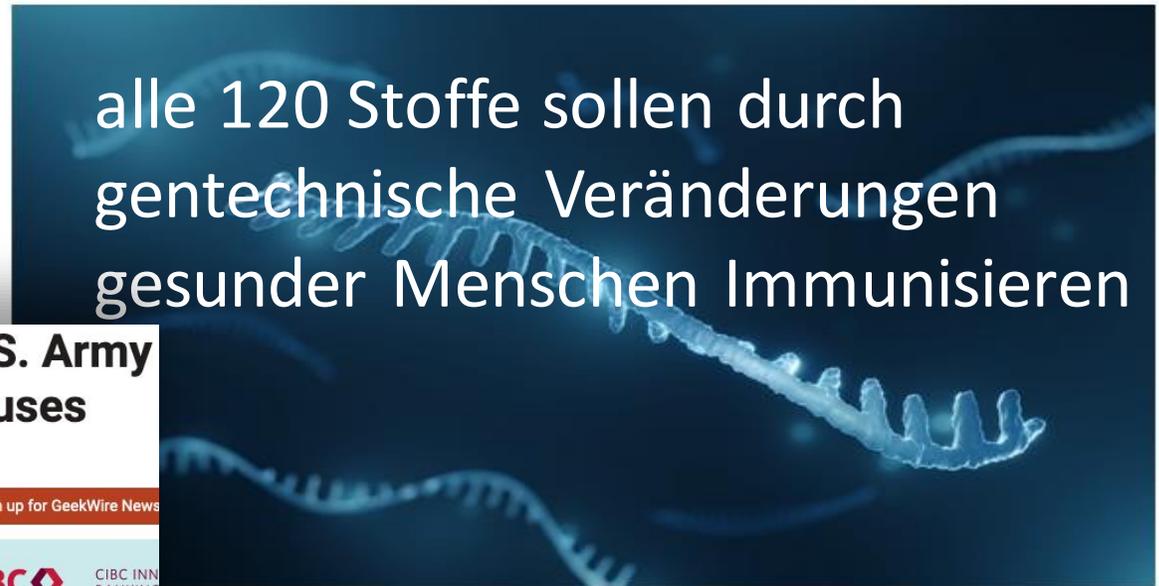
- Covid-19, z.Teil gegen „andere β -CoV, Grippe“, RSV, Metapneumoviren,
- Clamydien
- CMV
- Dengue
- Genitalherpes
- Grippe bzw. Influenza (s.a. Covid-19)
- Gürtelrose
- Hepatitis C
- HIV
- HPV
- Lassa-, Gelbfieber
- Lyme – Borelliose
- Malaria
- MERS CoV
- RSV und/oc
- Nipah
- M-Pox
- Novovirus
- Epstein-Ba
- Rotavirus
- Tollwut
- Tuberkulos
- West-Nil-Fi
- Zika

14. September 2023

mRNA-Impfstoffe für Schutzimpfungen

Bislang sind weltweit fünf mRNA-Impfstoffe für Schutzimpfungen gegen Covid-19 zugelassen, zwei davon in der EU. Viele weitere sind in Entwicklung, auch gegen andere Krankheiten.

<https://www.vfa.de/de/arzneimittel-forschung/coronavirus/rna-basierte-impfstoffe-in-entwicklung-und-versorgung>



alle 120 Stoffe sollen durch gentechnische Veränderungen gesunder Menschen Immunisieren

Seattle startup HDT Bio lands \$1.8M U.S. Army grant to develop nasal spray against viruses

BY CHARLOTTE SCHUBERT on August 11, 2022 at 7:56 am

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Seattle startup HDT Bio will develop a nasal spray designed to counteract a wide range of respiratory viruses with a nearly \$1.8 million grant from the U.S. Army.

“We hope to address not only disease progression, but transmission,” chief operating officer Christopher Pirie told GeekWire.

HDT Bio's platform involves a proprietary nanoparticle that delivers an attached RNA into cells. The technology is being harnessed to develop cancer treatments and vaccines. A COVID-19 RNA vaccine based on the company's tech was recently approved in India.



HDT Bio CEO Steve Reed. (HDT Bio Photo)

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Grow with confidence



von mRNA entwickelt sich zu einer menschlichen Schlüsseltechnologie. Einsetzbar ist in verschiedenen Gebieten: für Impfungen gegen Infektionskrankheiten, für die Impfung bei Krebspatient:innen und Therapeutika, die Behandlungen ohne Eingriff des Immunsystems erzielen sollen.

Deeplink

Dieser Artikel bleibt dauerhaft über www.vfa.de/mrna-schutzimpfungen erreichbar.

Watch out!

GMO: without needle

hinzu kommen Vektormethoden

Non-viral gene therapy: Gains and challenges of non-invasive administration methods

Marianna Foldvari  , Ding Wen Chen, Nafiseh Nafissi, Daniella Calderon, Lokesh Narsineni, Amirreza Rafiee

Show more 

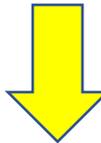
+ Add to Mendeley  Share  Cite

<https://doi.org/10.1016/j.jconrel.2015.12.012>

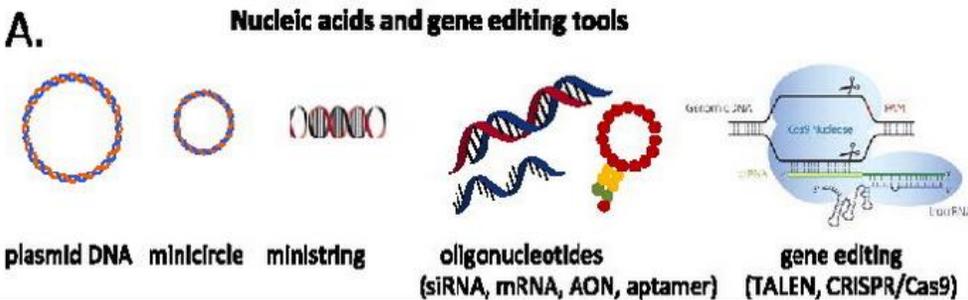
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Abstract

Gene therapy is becoming an influential part of the rapidly increasing armamentarium of biopharmaceuticals for improving health and combating diseases. Currently, three gene therapy treatments are approved by regulatory agencies. While these treatments utilize viral vectors, non-viral alternative technologies are also being developed to improve the safety profile and manufacturability of gene carrier formulations. We present an overview of gene-based therapies focusing on non-viral gene delivery systems and the genetic therapeutic tools that will further revolutionize medical treatment with primary focus on the range and development of non-invasive delivery systems for dermal, transdermal, ocular and pulmonary administrations and perspectives on other administration methods such as intranasal, oral, buccal, vaginal, rectal and otic delivery.

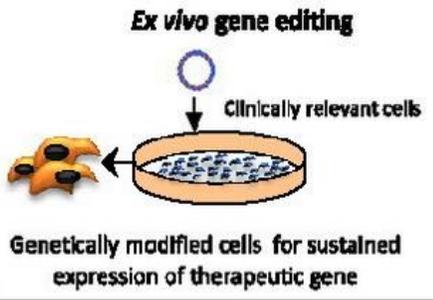
-  skin
- eye
- lungs
- nose
- genital
- guts
- ear

A. Nucleic acids and gene editing tools



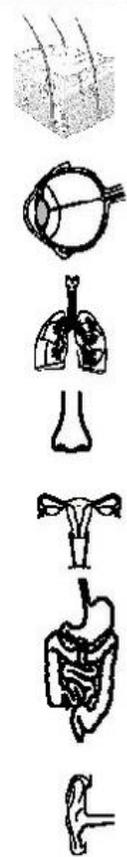
plasmid DNA minicircle ministring oligonucleotides (siRNA, mRNA, AON, aptamer) gene editing (TALEN, CRISPR/Cas9)

Ex vivo gene editing



Clinically relevant cells Genetically modified cells for sustained expression of therapeutic gene

B. Biomaterials and delivery systems
<https://doi.org/10.1016/j.jconrel.2015.12.012>

Building blocks	Nanoparticle types	Administration routes
<p>Nucleic acid packaging materials</p> <ul style="list-style-type: none"> Cationic lipids Cationic surfactants Cationic polymers Cationic peptides Cationic oligosaccharides Non-cationic agents 	<p>Single class systems</p> <ul style="list-style-type: none"> cationic liposomes polymeric NPs chitosan NPs solid lipid NPs functionalized lipid NPs carbon nanotubes dendrimers gold NPs 	
<p>Cellular and sub-cellular components</p> <ul style="list-style-type: none"> Targeting moieties Electrostatic binding agents Stealth agents Endosomolytic agents Nuclear localization signals 	<p>Hybrid systems</p> <ul style="list-style-type: none"> PLGA-PEG5k-CHA NPs surfactant-phospholipid NPs SPACE peptide-DOTAP ethosome SNA-NC 	

Source: https://ars.els-cdn.com/content/image/1-s2.0-S0168365915302649-fx1_lrg.jpg

The WHA - Theatre

2–6 October 2023	Fifth meeting of the WGIHR
9–12 October 2023	Regional Committee for the Eastern Mediterranean
16–20 October 2023	Regional Committee for the Western Pacific
24–26 October 2023	Regional Committee for Europe
6–10 November 2023	Continuation of the INB drafting group
4–6 December 2023	Seventh meeting of the INB
7–8 December 2023	Sixth meeting of the WGIHR
19 February–1 March 2024 <i>(two-week marathon)</i>	Eighth meeting of the INB and continuation of the drafting group
18–29 March 2024 <i>(two-week marathon)</i>	Ninth meeting of the INB and continuation of the drafting group
May 2024	Seventy-seventh World Health Assembly

INB: Intergovernmental Negotiating Body
(WHO-treaty Art. 19 / Art 21)

WGIHR: Working Group on Amendments to
the International Health Regulations (2005)



Governments continue discussions on pandemic agreement negotiating text

العربية 中文 Français Русский Español



NINTH MEETING OF THE INTERGOVERNMENTAL NEGOTIATING BODY TO DRAFT AND NEGOTIATE A WHO CONVENTION, AGREEMENT OR OTHER INTERNATIONAL INSTRUMENT ON PANDEMIC PREVENTION, PREPAREDNESS AND RESPONSE
Provisional agenda item 2

A/INB/9R/3
April 2024

Proposal for the WHO Pandemic Agreement

Distraction?

Article 5. One Health

4. The modalities, terms and conditions, and operational dimensions of a One Health approach shall be further defined in an instrument, that takes into consideration the provisions of the IHR (2005), and is operational **by 31 May 2026**.

Article 6. Preparedness, readiness and health system resilience

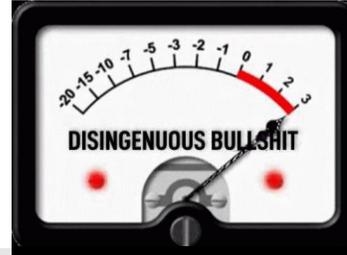
5. With the aim of promoting and supporting learning among Parties, best practices, and accountability and coordination of resources, **an inclusive, transparent, effective and efficient pandemic prevention, preparedness and response monitoring and evaluation system shall be developed, implemented and regularly assessed**, by WHO in partnership with relevant organizations, building on relevant tools, **on a timeline to be agreed by the Conference of the Parties**.

Article 12. Access and benefit sharing

6. The modalities, terms and conditions, and operational dimensions of the PABS System shall be further defined in a legally-binding instrument, that is **operational no later than 31 May 2026**.

Article 13. Supply chain and logistics

6. A multilateral system for managing vaccine and therapeutic related compensation and liability during pandemics **shall be considered**.



voting
but
postponing
....
while
the evil
continues

Article 20. Sustainable financing

4. The [Coordinating Financial] Mechanism shall function under the authority and guidance of the Conference of the Parties and be accountable to it. The Conference of the Parties shall adopt terms of reference for the [Coordinating Financial] Mechanism and modalities for its operationalization and governance, **within 12 months after the entry into force of the WHO Pandemic Agreement**.

Article 21. Conference of the Parties

6. **The Conference of the Parties shall by consensus adopt financial rules for itself** as well as governing the funding of any subsidiary bodies it may establish as well as financial provisions governing the functioning of the Secretariat.

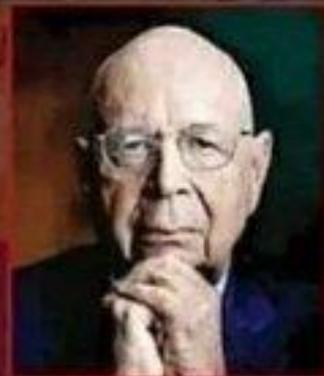
Article 33. Signature

2. **This Agreement shall be open for signature** at the World Health Organization headquarters in Geneva, following its adoption by the World Health Assembly at its Seventy-seventh session, **from 17 June 2024 to 28 June 2024**, and thereafter at United Nations Headquarters in New York, from 8 July 2024 to 7 July 2025.

Article 35. Entry into force

1. This Agreement shall enter into force on the **thirtieth day following the date of deposit of the sixtieth instrument of ratification**, acceptance, approval, formal confirmation or accession with the Depositary.

THE GREAT RESET



"WHAT WE ARE VERY PROUD OF NOW IS HOW WE PENETRATE THE CABINETS AROUND THE WORLD"
- KLAUS SCHWAB 2017

@THERAWSPEAK

WORLD ECONOMIC FORUM



new top-candidate for the leftist party Syriza (GR) just arrived from Goldman-Sachs



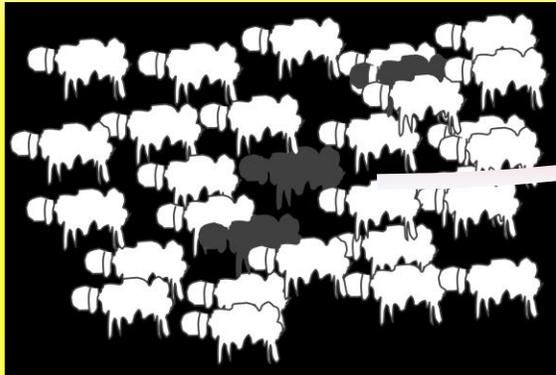
Corruption at the top is most efficient

institutional corruption

parasitic greed

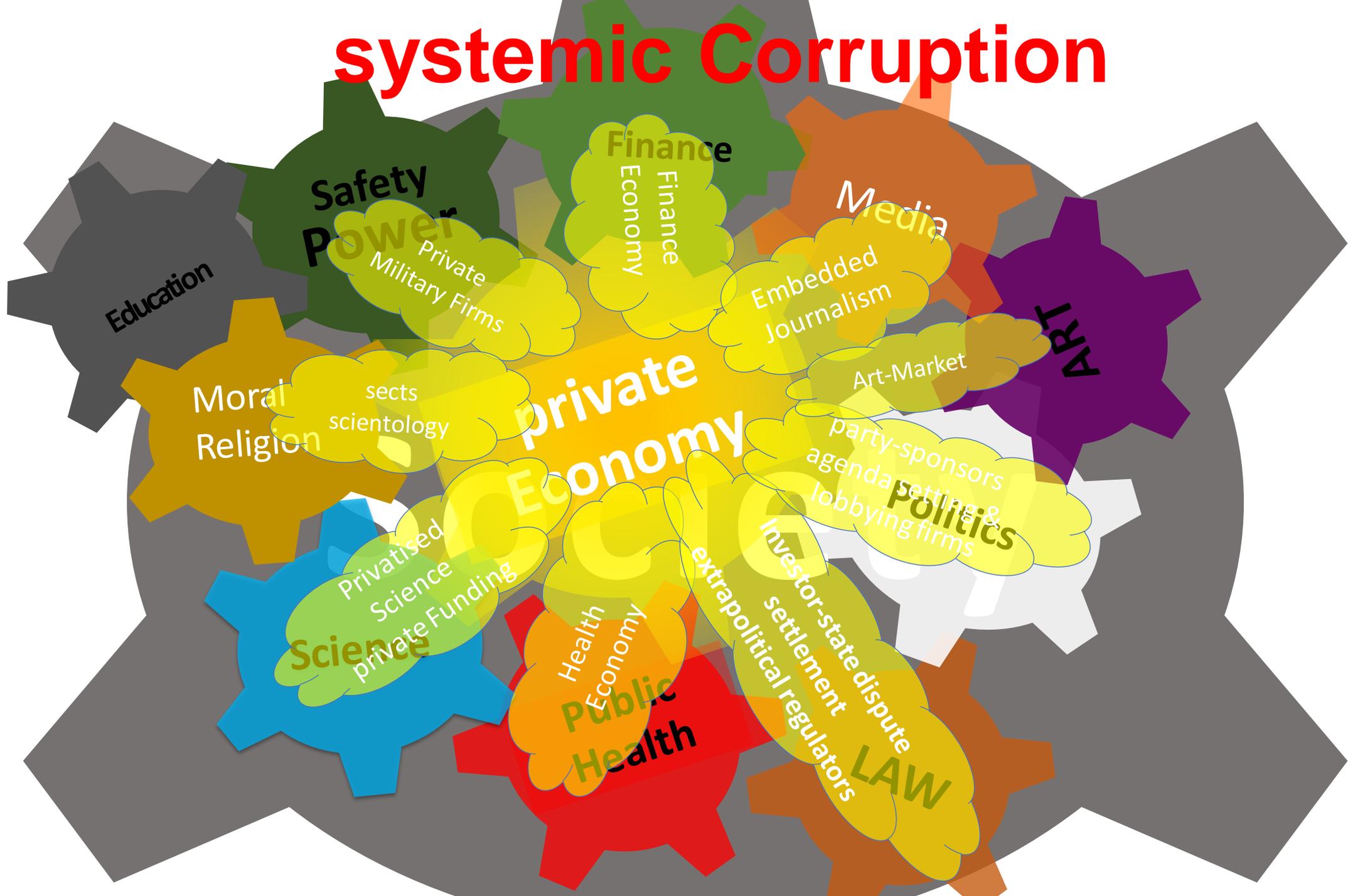
a privatized medical institution with „white sheep“

public health care institution with „black sheep“



lobbying, economizing care, medicine, science, media...

systemic Corruption

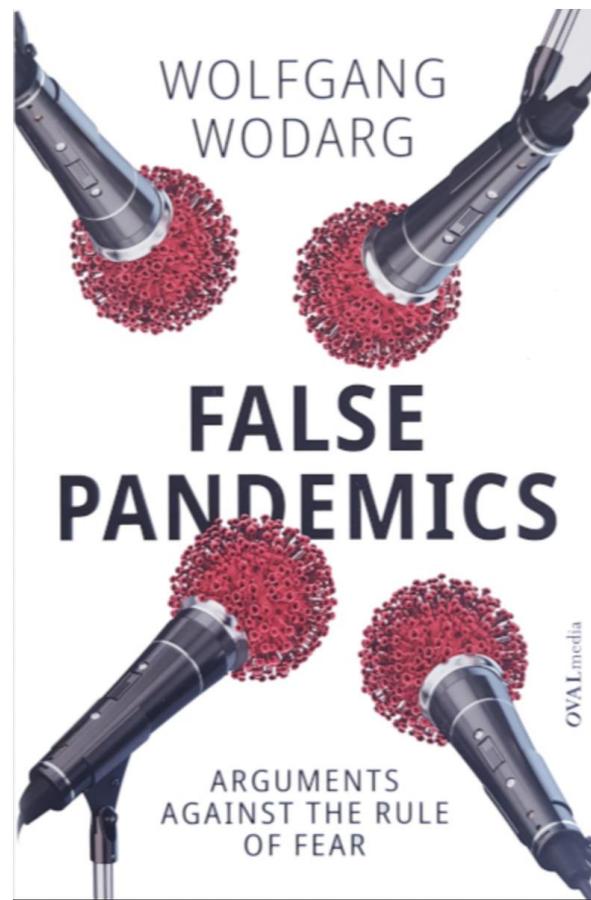


$$R = \frac{T}{S \times C}$$



R = Resilience, T = Transparency, S = Size, C = Complexity

Grazie mille per l'attenzione!



more infos: www.wodarg.com