

## The NHS Just Changed How They Count Covid “Cases”... Here’s Why

### Description

by Kit Knightly via Off-Guardian



Licensed from Adobe Stock

The UK’s National Health Service has received new instructions from the government on how it should record Covid19 “cases”, separating those who are actually sick from those who just test positive.

From the beginning of the “pandemic” last spring, the NHS (and other countries all over the world) have defined a “case” as anyone who tests positive for the Sars-Cov-2 virus, regardless of whether or not they have symptoms.

Given that as many as 80% of those who have been infected [have no symptoms](#), and the propensity for the [flawed PCR tests](#) to return [false-positive results](#), this lead to likely massively inflated numbers of “cases”.

Now, though, the NHS is going to attempt to differentiate between patients who actually have the alleged disease “Covid19”, and those who are in hospital for other reasons and only “incidentally” tested positive for the virus.

According to a report in the Independent [emphasis added]:

NHS England has instructed hospitals to make the change to the daily flow of data sent by NHS trusts [...] Hospitals have been told to change the way they collect data on patients infected with coronavirus to differentiate between those actually sick with symptoms and those who test positive while seeking treatment for something else.

The distinction between “with” and “from” in Covid deaths – and “with” and “for” in hospitalisations – has been one Covid sceptics all over the world have been keen to make for over a year, but this is the first time any institution has really recognised the difference. And, certainly, it’s the first time any healthcare service has endeavoured to actually catalogue them differently.

So what does the NHS expect the impact of this change to be? Again, from the Independent:

One NHS source said the new data would be “more realistic” as not all patients were sick with the virus, adding: “But it will make figures look better as there have always been some, for example stroke [patients], who also had Covid as an incidental finding”.

That’s a frank admission, and an important one.

For the last eighteen months, voices all over the alternate media have been saying the Covid numbers are unrealistic, specifically because they include people who were never actually sick. We have been called “deniers” and “conspiracy theorists” for our trouble.

But now an NHS source has actually said, going forward, the Covid data will be “more realistic” as it will discount all the patients where Covid was only “an incidental finding”. This is a bigger story than the media coverage suggests – only the Indy and [Telegraph](#) are covering it right now, and neither with the focus it deserves.

NHS England is, essentially, tucking away a covert admission that a lot of their fear-mongering statistics were never “realistic”.

Why would they do this? And why now?

Well, here’s what they claim [emphasis added]:

[The NHS said] the move was being done to help analyse the effect of the vaccine programme and whether it was successfully reducing Covid-19 sickness.

But it doesn’t really make any sense, when you think about it.

It will “help analyse the effect of the vaccine programme”? How so?

How does changing the definition at this point possibly help “analyse” anything? Doesn’t it confuse the issue?

Won't it, in fact, effectively reduce the numbers of official "covid cases"? Doesn't making the numbers "look better", at this stage, make the "vaccine" appear more effective?

It's also important to note that the changes in data collection will only apply to new patients, it will not be retroactive. Prof Keith Willett, NHS England's Covid incident director, was very clear on that in a quote for the Telegraph [emphasis added]:

In lay terms this could be considered as a binary split between those in hospital 'for Covid-19' and those in hospital 'with Covid-19'. We are asking for this binary split for those patients newly admitted to hospital and those newly diagnosed with Covid while in hospital."

So, the old (and now admitted unrealistic) data, will not be subject to change. The Covid "case" numbers before June 7th are etched in stone – everyone who tested positive was a "case".

But after June 7th they will be separating Covid cases who are actually hospitalised due to Covid19, from other patients who only have "incidental covid".

Any good scientist will tell you you can't change the way you measure or collect your data halfway through an experiment, and you can't compare data gathered in one way to data gathered in another. That is not "analysing the effect" of anything, it's altering the experiment conditions.

The difference between "with" and "for" has always existed, but by applying that filter only to new data they will make it appear that it's a new phenomenon, caused by the vaccination programme.

It is incredibly bad science.

...but it's also totally in keeping with the trend of altering Covid practices to create the impression the "vaccine" is having a positive impact.

We've already reported that WHO changed their [Covid diagnosis guidelines](#), and their [PCR test guidelines](#), in late 2020 and early 2021, right in line with the first vaccination programs being launched. The US CDC has likewise been [repeatedly fiddling](#) their definition of "[breakthrough infection](#)" in order to make the vaccines appear more effective.

This NHS change is just more of the same – altering the experimental conditions to achieve the desired outcome. A total, complete inversion of the scientific method, by the same people who zealously scream about "following the science".

It is deliberate manipulation of the data, being done brazenly in the public eye.

But what impact will it actually have? Throughout the pandemic, how many patients were ever sick with only Covid, and how many had cancer, or a stroke or Alzheimers along with "incidental covid"?

Well, official figures on deaths have shown that well over 80% of so-called "Covid deaths" [had at least one serious pre-existing condition](#), and Bernard Marx did a great breakdown of how the [cause of death figures are manipulated](#). But that's deaths, what about hospital admissions?

Although only anecdotal, we have been sent results of several Freedom of Information Act requests that UK citizens submitted to their local NHS trusts. These FOI requests ask for the number of people currently in hospital being treated for Covid, or numbers who died solely due to Covid or variations on that theme. Here's [1](#), [2](#), [3](#), [4](#) them. There are a lot more available.

The numbers are uniformly small. So, it's entirely possible that, under this new method of "analysis", the NHS's list of "Covid cases" will shrink to almost nothing.

Don't worry though, should that happen we will likely never be told about it, because NHS England has made it quite plain that they might never release this data to the public. Both the Independent and Telegraph say so, with almost word-for-word the exact same sentence:

NHS England has not yet confirmed whether the data will be made public, as it must be checked and verified first.

They need to "check" and "verify" the data before we're allowed to see it, huh? It's almost as if they've got something to hide.