Due to an influx of emails and comments, we felt the need to recap why we believe SARS-COV-2 has yet to be proven to exist. Firstly one has to discuss what process virologists use in the discovery of a new virus.

Isolation versus Purification

Virologists must know that the common definition of isolation and purification are virtually identical. For example, according to the Oxford English Dictionary:

- Isolation • “The action of isolating; the fact or condition of being isolated or standing alone; separation from other things or persons; solitariness”.
- Purification • “Freeing from dirt or defilement; cleansing; separation of the dross, dregs, refuse, or other debasing or deteriorating matter, to obtain the substance in a pure condition”.

One can argue about subtleties, but if you took some ore and isolated gold, it would be the same as purifying gold. But with viruses, virologists have thoroughly debased the word “isolation” while rarely using the word “purification”.

Spread the Word

via Freedom of Speach
Since 1954, virologists have taken unpurified samples from a relatively few people, often less than ten, with a similar disease. They then minimally process this sample and inoculate this unpurified sample onto tissue culture containing usually four to six other types of material — all of which contain identical genetic material as to what is called a “virus.” The tissue culture is starved and poisoned and naturally disintegrates into many types of particles, some of which contain genetic material. Against all common sense, logic, use of the English language and scientific integrity, this process is called “virus isolation.” This brew containing fragments of genetic material from many sources is then subjected to genetic analysis, which then creates in a computer-simulation process the alleged sequence of the suspected virus, a so-called in silico genome. At no time is an actual virus confirmed by electron microscopy. At no time is a genome extracted and sequenced from a real virus.

The proper way to isolate, characterize and demonstrate a new virus is to firstly take samples (blood, sputum, secretions) from many people (e.g. 500) with symptoms that are unique and specific enough to characterize an illness. Without mixing these samples with ANY tissue or products that also contain genetic material, the virologist macerates, filters, and ultracentrifuges i.e. purifies the specimen. This common virology technique, done for decades to isolate bacteriophages1 and so-called giant viruses in every virology lab, then allows the virologist to demonstrate with electron microscopy thousands of identically sized and shaped particles. These particles are then isolated and purified virus.

These identical particles are then checked for uniformity by physical or microscopic techniques. Once the purity is determined, the particles may be further characterized. This would include examining the structure, morphology, and chemical composition of the particles. Next, their genetic makeup is characterized by extracting the genetic material directly from the purified particles and using genetic-sequencing techniques, such as Sanger sequencing, that have also been around for decades. Then one does an analysis to confirm that these uniform particles are exogenous (outside) in origin as a virus is conceptualized to be, and not the normal break-down products of dead and dying tissues.2 (we know that virologists have no way to determine whether the particles they are seeing are viruses or just typical break-down products of dead and dying tissues.)3

If we have come this far, then we have fully isolated, characterized, and genetically sequenced an exogenous virus particle. However, we still have to show it is causally related to a disease. This is carried out by exposing a group of healthy subjects (animals are usually used) to this isolated, purified virus in the manner in which the disease is thought to be transmitted. If the animals get sick with the same disease, as confirmed by clinical and autopsy findings, one has now shown that the virus actually causes disease. This demonstrates infectivity and transmission of an infectious agent.
None of these steps has even been attempted with the SARS-CoV-2 virus, nor have all these steps been successfully performed for any so-called pathogenic virus. Our research indicates that a single study showing these steps does not exist in the medical literature.

1 Isolation, characterization and analysis of bacteriophages from the haloalkaline lake Elmenteita, Kenya
Juliah Khayeli Akhwale et al, PLOS One, Published: April 25, 2019.
https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0215734 — accessed 2/15/21


Dr Lanka’s conducted a study to reproduce this process, except they used proper control experiments to show that each one of these steps can be done without the presence of a virus.

- In other words, cytopathic effects are observed due to cell starvation and the introduction of antibiotics and other toxic chemicals;
- Computer programs can manufacture “viral” sequences without the need for an actual virus to be present and, finally;
- The particles seen under the electron microscope are normal constituents of dead and dying cells.

This was the first study of its kind, and it is truly revolutionary.

https://odysee.com/@DeansDanes:1/cpe-english:

The Wuhan Center for Disease Control and Prevention and the Shanghai Public Health Clinical Centre published the first full SARS-CoV-2 genome (MN908947.1 ). This has been updated many times. However, MN908947.1 was the first genetic sequence describing the alleged COVID 19 etiologic agent (SARS-CoV-2).

All subsequent claims, tests, treatments, statistics, vaccine development and resultant policies are based upon this sequence. If the tests for this novel virus don’t identify anything capable of causing illness in human beings, the whole COVID 19 narrative is nothing but a charade.
The WUHAN researchers stated that they had effectively pieced the SARS-CoV-2 genetic sequence together by matching fragments found in samples with other, previously discovered genetic sequences. From the gathered material, they found an 87.1% match with SARS coronavirus (SARS-Cov). They used de novo assembly and targeted PCR and found 29,891-base-pair, which shared a 79.6% sequence match to SARS-CoV.

They had to use de novo assembly because they had no prior knowledge of the correct sequence or order of those fragments. Quite simply, the WHO’s statement that Chinese researchers isolated the virus on the 7th January is false.

The Wuhan team used 40 rounds of RT-qPCR amplification to match fragments of cDNA (complementary DNA constructed from sampled RNA fragments) with the published SARS coronavirus genome (SARS-CoV). Unfortunately, it isn’t clear how accurate the original SARS-CoV genome is either.

Exhibit: A – The test was produced BEFORE having virus material available.


Background: The ongoing outbreak of the recently emerged novel coronavirus (2019-nCoV) poses a challenge for public health laboratories as VIRUS ISOLATES ARE UNAVAILABLE while there is growing evidence that the outbreak is more widespread than initially thought, and international spread through travellers does already occur. Aim: We aimed to develop and deploy robust diagnostic methodology for use in public health laboratory settings WITHOUT HAVING VIRUS MATERIAL AVAILABLE. Methods: Here we present a validated diagnostic workflow for 2019-nCoV, its design relying on close genetic relatedness of 2019-nCoV with SARS coronavirus, making use of synthetic nucleic acid technology.

A novel coronavirus currently termed 2019-nCoV was officially announced as the causative agent by Chinese authorities on 7 January. A viral genome sequence was released for immediate public health support via the community online resource virological.org on 10 January (Wuhan-Hu-1, GenBank accession number MN908947 [2]), followed by four other genomes deposited on 12 January in the viral sequence database curated by the Global Initiative on Sharing All Influenza Data (GISAID).
GENOME SEQUENCES SUGGEST PRESENCE OF A VIRUS closely related to the members of a viral species termed severe acute respiratory syndrome (SARS)-related CoV, a species defined by the agent of the 2002/03 outbreak of SARS in humans [3,4]. The species also comprises a large number of viruses mostly detected in rhinolophid bats in Asia and Europe.

Exhibit: B – NO PROOF FOR THE RNA BEING OF VIRAL ORIGIN

What is required first for virus isolation/proof? We need to know where the RNA for which the PCR tests are calibrated comes from.

As textbooks (eg, White / Fenner. Medical Virology, 1986, p. 9) as well as leading virus researchers such as Luc Montagnier or Dominic Dwyer state, particle purification – ie the separation of an object from everything else that is not that object, as for instance Nobel laureate Marie Curie purified 100 mg of radium chloride in 1898 by extracting it from tons of pitchblende – is an essential pre-requisite for proving the existence of a virus, and thus to prove that the RNA from the particle in question comes from a new virus.

The reason for this is that PCR is extremely sensitive, which means it can detect even the smallest pieces of DNA or RNA – but it cannot determine where these particles came from. That has to be determined beforehand.

And because the PCR tests are calibrated for gene sequences (in this case, RNA sequences because SARS-CoV-2 is believed to be an RNA virus), we have to know that these gene snippets are part of the looked-for virus. And to know that, correct isolation and purification of the presumed virus has to be executed.

Hence, we have asked the science teams of the relevant papers which are referred to in the context of SARS-CoV-2 for proof whether the electron-microscopic shots depicted in their in vitro experiments show purified viruses.

But not a single team could answer that question with “yes” – and NB., Nobody said purification was not a necessary step. We only got answers like “No, we did not obtain an electron micrograph showing the degree of purification” (see below).

We asked several study authors, “Do your electron micrographs show the purified virus?”, They gave
the following responses:

Study 1: Leo LM Poon; Malik Peiris. “Emergence of a novel human coronavirus threatening human health” Nature Medicine, March 2020

Replying Author: Malik Peiris

Date: May 12, 2020

Answer: “The image is the virus budding from an infected cell. It is not purified virus. “


Replying Author: Myung-Guk Han

Date: May 6, 2020

Answer: “We could not estimate the degree of purification because we do not purify and concentrate the virus cultured in cells. “


Replying Author: Wan Beom Park

Date: March 19, 2020

Answer: “We did not obtain an electron micrograph showing the degree of purification. “


Replying Author: Wenjie Tan
Date: March 18, 2020

Answer: “[We show ] an image of sedimented virus particles, not purified ones. “

Source: COVID19 PCR Tests are Scientifically Meaningless

Exhibit: C – CDC and EU Commission acknowledge that the virus has never been isolated

It is unequivocally recognized by both the European Commission and the US CDC, the most important national health organization in the world that the virus has never been isolated. The European Commission, which in its document of 16 April 2020 last wrote: “Since no virus isolates with a quantified amount of the SARS-CoV-2 are currently available ...”1

The CDC writes: “Since no quantified virus isolates of the 2019-nCoV are currently available...”2

In short, both Europe and the US say the same thing: they call a material in which the virus has not been quantified “isolated virus”. But if it hasn’t been quantified, how can it be an isolated virus?

“In other words, it is a Frankenstein virus which has been concocted and stitched together using genomic database sequences (some viral, some not). It has never been properly purified and isolated so that it could be sequenced from end-to-end once derived from living tissue; instead, it’s just digitally assembled from a computer database. In this paper, the CDC scientists state they took just 37 base pairs from a genome of 30,000 base pairs which means that about 0.001% of the viral
sequence is derived from actual living samples or real bodily tissue. In other words, they took these 37 segments and put them into a computer program, which filled in the rest of the base pairs.


Exhibit: D – FOIs reveal that health/science institutions around the world have no record of SARS-COV-2 isolation/purification anywhere, ever

Here are five compilation pdfs containing FOI responses from 79 institutions in 22 countries/jurisdictions, re the isolation/purification/existence of “SARS-COV-2”, as well as emails from authors of studies that claimed to have “isolated the virus” and an email from the Head of the Consultant Laboratory for Diagnostic Electron Microscopy of Infectious Pathogens at Germany’s Robert Koch Institute, last updated July 13, 2021

Part 1:

Part 2:

Part 3:

Part 4:
Part 5:

Source:
https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-around-the-world-have-no-record-of-sars-cov-2-isolation-purification/

Exhibit: E Dr. Wu Zunyou-Chinese Center for Disease Control- "They did not isolate the virus".

Exhibit: F – FDA document admits “covid” PCR test was developed without isolated covid samples for test calibration, effectively admitting it’s testing something else

Please note this an updated version of Centers for Disease Control and Prevention, Division of Viral Diseases, CDC 2019-Novel Coronavirus 2 (2019-nCoV) Real-Time RT-PCR Diagnostic Panel and is effective: 07/21/21 so essentially they still DON'T have ANY quantified virus isolates

The analytical sensitivity of the rRT-PCR assays contained in the CDC 2019 Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel were determined in Limit of Detection studies. Since NO QUANTIFIED VIRUS ISOLATES of the 2019-nCoV were available for CDC use at the time, the test was developed, and this study conducted
Has SARS-COV-2 been isolated and purified to show existence?

https://www.fda.gov/media/134922/download

Exhibit: G – SARS-CoV-2 the Theoretical Virus: UK Government Couldn’t Produce Evidence

The governments of many nations around the world couldn’t seem to come up with a real virus either when challenged to do so. More evidence proving the “virus” is constructed on a computer database from a digital gene bank comes from Frances Leader, who questioned the UK MHRA (Medicines and Healthcare products Regulatory Agency) whether a real isolated virus was used to make the COVID vax (read more about the COVID vaccine which is not a vaccine here). Leader found that the WHO protocols that Pfizer used to produce the mRNA do not appear to identify any nucleotide sequences that are unique to the SARS-CoV-2 virus. Leader asked if the “virus” was actually a computer generated genomic sequence, and ultimately the MHRA confirmed they had no real specimen:

“The DNA template does not come directly from an isolated virus from an infected person.”

These are just a few examples, there are many more. So has SARS-COV-2 been isolated and purified to show existence? You decide.

Extracts cited:

T Engelbrecht, K Demeter, Cowan & Kaufman, I Davis, C Massey, fos-sa.org, M Freeman

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