

How Censorship Perpetuates Medical Tyranny

**Pamela A. Popper, President
Wellness Forum Health**

Note: This is a transcript of a presentation I delivered at a conference recently on the topic of medical censorship.

Medical tyranny is defined as the partnership between government agencies, the medical profession, and drug companies to control people's lives. Scientific censorship protects the interests of powerful institutions like government, medicine, and corporations, and in the case of COVID-19, it has been used to perpetuate the biggest episode of medical tyranny in the history of the world for almost two-and one-half years.

There are many avenues for censoring information. One of them is the weaponizing of state licensure boards to prevent unlicensed health professionals from providing services by subjecting them to investigations and prosecution. These boards also investigate, discipline, restrict, and sometimes revoke the licenses of health professionals who offer alternative treatments or who speak out against anything promoted by conventional institutions.

These activities serve to reduce or eliminate the open exchange of ideas and competition, and also to protect Big Pharma other corporate interests.

Censoring Doctors

The censorship of doctors has accelerated during the COVID debacle. There are now thousands of doctors who are either being investigated or who have had their licenses suspended because they have prescribed off-label drugs for the treatment of COVID-19, or have spoken out about lockdowns or masks or COVID vaccines. The average cost to defend each doctor will be between \$60,000 and \$100,000 and most doctors cannot afford to pay for their own defense. Make Americans Free Again is providing funding for as many doctors as possible, but the total tab for defending all is going to be in the range of \$100-\$200 million dollars, assuming that no new doctors are targeted. I'm certain, however, that this harassment and interference with medical practice will continue.

The topic that seems to instigate the most aggressive regulatory actions against doctors is any discussion of potential harm from COVID-19 vaccines. It is important to note just how egregious the persecution of doctors who speak out about the COVID vaccines really is, which we can show by looking at how similar situations were handled historically:

When a flu vaccine was suspected of causing a few deaths in 1976, it was quickly withdrawn from the market.¹ It was later determined that hundreds of people developed Guillain-Barre Syndrome due to the vaccine, and this episode was considered one of the worst public health disasters of all time.^{2 3}

Contrast this with how COVID vaccines have been handled. Within the first few months after the vaccines were made available, there were almost 20,000 reported deaths, and this number continues to increase. There are now hundreds of thousands of reports of side effects and injury in the VAERS data base. Yet the vaccines have been approved for children who have a statistically zero percent change of hospitalization and death from COVID-19 and newborns are next.

Yet doctors who disagree with this policy and urge caution are censored, investigated, and sometimes delicensed.

We must end this constant interference in the practice of medicine, or there will be no independent thinkers left in the medical profession.

Drug Companies Control Government AND Messaging From the Media

Another means of censorship results from the billions of dollars per year spent by drug companies to influence government agencies and then to control the media so that the general public only hears good things about drugs and vaccines.

This influence starts with the FDA. In 1992 Congress passed a law which provided for the drug and device makers to pay the FDA to review their products. By 2015 the approval rate was 96% (wouldn't you like to see the 4% they turned down??).⁴ In 2019 drug companies paid the FDA \$2.6 billion dollars to have their products reviewed.⁵ The agency has stopped even the appearance of objective review. This began a couple of years ago when the FDA began ignoring the recommendations of its committees,⁶ and has progressed to the place where the agency recently announced that it would not bother to hold a formal advisory committee meeting to discuss full approval of the Pfizer COVID-19 vaccine.⁷

The CDC receives money from drug companies indirectly through the National Foundation for the Centers for Disease Control and Prevention. The Foundation's 2019 tax return shows income of \$319,202,505, much of it from drug and vaccine makers and from the Bill and Melinda Gates Foundation.

The Foundation for the National Institutes of Health was established by Congress in 1990. According to the Foundation's 2019 tax return, donations totaled \$152,094,881⁸ and top donors included The Bill and Melinda Gates Foundation, GlaxoSmithKline, Eli Lilly, Johnson and Johnson, and Pfizer.⁹

Many people, including many doctors, still believe that “FDA approved” means that a drug has been subjected to rigorous review. As stated above, this is clearly not the case. The media promotes this false idea too, for good reason. Drug companies collectively spend billions of dollars per year on advertising. In 2020, drug companies spent \$4.58 billion on advertising on national television alone.¹⁰ In return, they are guaranteed that the public will receive almost exclusively favorable news coverage about drugs and vaccines. Doctors, researchers, and epidemiologists who have opinions contrary to the interests of drug makers are generally not interviewed by news anchors and talk show hosts.

Any attempts to reach people with accurate information through social media are censored. This has happened to me. I’ve been suspended from YouTube for periods of time and shadow-banned on Facebook for my views about COVID-19.

The Federal Government Actively Engages in Censorship

The federal government aggressively censors too. Here’s an example: The Great Barrington Declaration was posted in October 2020 and proposed that the government’s efforts to control COVID-19 should be more focused on at-risk populations.

The three main authors were Harvard epidemiologist Dr. Martin Kulldorff, University of Oxford epidemiologist Dr. Sunetra Gupta, and Stanford Medical School epidemiologist Dr. Jay Battacharya. Nobel Prize laureate Dr. Michael Levitt was one of the first signers.¹¹ The Great Barrington Declaration initially was widely circulated via social media.

Emails between Frances Collins, then head of the NIH and Anthony Fauci which were obtained through FOIA requests show that the two discussed how to silence these scientists and debunk the Declaration.

“This proposal from the three fringe epidemiologists ... seems to be getting a lot of attention,” Collins wrote to Fauci. “There needs to be a quick and devastating published takedown of its premises...”

Collins’s instructions to silence U.S. scientists should be concerning to all of us. It shows the extent to which scientific debate is being silenced. There is no “Free Speech” – there is only “approved speech” and everything else is forbidden and censored.

Fauci’s response showed that he was on board, praising an op-ed posted on *Wired* which excoriated the declaration without including even one scientific reference. Fauci subsequently made dozens of media appearances debunking the declaration and within only one day of Collins’ email, Google began censoring search results for “Great Barrington Declaration.”¹²

The same tactics were used to quash the overwhelming body of evidence showing that SARS-CoV-2, the virus that causes COVID-19, did not originate at the wet market but rather was released from a bioweapons lab in Wuhan.

Medical Journals Are Another Problem

According to Marcia Angell, former editor of the *New England Journal of Medicine*: “It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines.”

Richard Horton, editor of *The Lancet*, wrote that “The case against science is straightforward: much of the scientific literature, perhaps half, may simply be untrue. Afflicted by studies with small sample sizes, tiny effects, invalid exploratory analyses, and flagrant conflicts of interest, together with an obsession for pursuing fashionable trends of dubious importance, science has taken a turn towards darkness.”

Horton talks a good game, and seems to recognize that journals are publishing garbage, but he has made no effort to clean up his own journal.

For example, On May 22, 2020 the *Lancet* published a study reporting that hydroxychloroquine was linked to increased risk of arrhythmias and deaths in hospitals all over the world.¹³ The paper covered research conducted by a company called Surgisphere, which had supposedly gathered data on tens of thousands of patients in hundreds of hospitals worldwide.

The *Lancet* paper had a major impact on both policy and research. It was referenced by Fauci and other health officials who told the world repeatedly that the drug was useless and harmful. Studies including HCQ were halted.

The problem was that the data was fake. Hospitals around the world stated they had never been contacted by Surgisphere or its representatives. The data was so skewed that for some hospitals, the number of deaths exceeded the number reported for the entire country.¹⁴

The most incredible part of this debacle was Surgisphere. One of the firm’s science editors turned out to be a science fiction writer and fantasy artist. The company’s marketing director also had a career as an adult model and events hostess. The company’s LinkedIn page showed only three employees, making it highly unlikely that the company had the resources to gather and analyze a large data base consisting of 96,032 patients who were admitted to hundreds of hospitals on six continents by April 14, 2020.¹⁵

This study was eventually retracted but today many people, including doctors, believe that HCQ, which has been used safely for decades, is available over the counter in

many countries, and has been proven effective for at-home treatment of COVID patients, is dangerous. The media does not allow news programs and talk shows to feature any guest who prescribes it. Doctors who prescribe it get threatening letters from medical boards. Hospitals have been forbidden by Mr. Fauci to give HCQ to patients and are ordered and financially incentivized to give remdesivir, a drug that was approved only after Mr. Fauci changed the endpoint for the clinical trial from preventing death from COVID-19 to "time to recovery." Even with this changed benchmark, which is highly unusual during a trial, the data did not reach statistical significance.¹⁶

If I posted information about any of this on Facebook or YouTube, I'd be immediately suspended. And letters to the editors of these journals to present contrary viewpoints are almost never published.

Medical journals have come to resemble the *National Enquirer* more than scientific publications, although this comparison may actually be a tad bit insulting to the *National Enquirer*. But they influence the practice of medicine all over the world. And charlatans like Collins and Fauci use the garbage they print to support their decisions.

It Goes On (and on, and on!)

Our organization, Make Americans Free Again, our attorneys, and our experts have provided, under penalty of perjury, thousands of pages of evidence to courts all over the country concerning COVID-related policies like lockdowns and masks, the withholding of effective drugs to treat COVID, and the lack of efficacy and the dangers of the so-called vaccines. We have all been censored by social media, vilified by people who we used to call friends, and some of us have had our lives threatened.

Funding has been withdrawn from people who have a difference of opinion. And articles related to COVID authored by experts like Dr. Peter McCullough, who had published over 600 articles in peer reviewed journals before the debacle began, have been retracted without any valid reason. Institutions and academic centers have fired or threatened to fire anyone who speaks out or challenges the COVID party line.

As a rule, censorship assumes that members of the public cannot be trusted to understand important issues and make decisions for themselves. Therefore, we should only receive "approved information" from "approved sources," and questions and access to scientists with different opinions are not permitted.

We have reached point where we either fix this or resign ourselves to living with a Soviet-style medical system that is run by sycophants who dutifully represent the government and its pharmaceutical partners. The courts are likely the only way to fix it. The rot and corruption inside the system makes it impossible for resolution from within.

¹ <https://www.history.com/news/swine-flu-rush-vaccine-election-year-1976>

² Schonberger L, Bregman D, Sullivan-Bolyai J, et al. "Guillain-Barre syndrome following vaccination in the National Influenza Immunization Program, United States, 1976–1977." *Am J Epidemiol* 1979; 110(5):105–23.

³ <https://www.history.com/news/swine-flu-rush-vaccine-election-year-1976>

⁴ "The FDA Is Basically Approving Everything. Here's The Data To Prove It."

<http://www.forbes.com/sites/matthewherper/2015/08/20/the-fda-is-basically-approving-everything-heres-the-data-to-prove-it/>

⁵ <https://fas.org/sgp/crs/misc/R44576.pdf>

⁶ <https://www.statnews.com/2021/06/08/fda-expert-panel-resigns-alzheimers-approval/>

⁷ Covid-19: FDA set to grant full approval to Pfizer vaccine without public discussion of data. *BMJ* 2021 Aug;374:n2086

⁸ <https://fnih.org/sites/default/files/pdf/FNIH%202019%20990%20for%20Public%20Inspection.pdf>

⁹ <https://2020-annual-report.fnih.org/donors/>

¹⁰ <https://www.statista.com/statistics/953104/pharma-industry-tv-ad-spend-us/>

¹¹ <https://gbdeclaration.org/>

¹² Stephen M Lepore. 'There needs to be a quick and devastating takedown': Emails show how Fauci and head of NIH worked to discredit three experts who penned the Great Barrington Declaration which called for an end to lockdowns. *Daily Mail* December 18 2021

¹³ Mehra MR, Desai SS, Ruschitzka F, Patel AN. "Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis." *Lancet* May 22 2020

DOI:[https://doi.org/10.1016/S0140-6736\(20\)31180-6](https://doi.org/10.1016/S0140-6736(20)31180-6) RETRACTED

¹⁴ Melissa Davey. Questions raised over hydroxychloroquine study which caused WHO to halt trials for COVID-19. *The Guardian* May 27 2020 <https://www.theguardian.com/science/2020/may/28/questions-raised-over-hydroxychloroquine-study-which-caused-who-to-halt-trials-for-covid-19> accessed 9.2.2020

¹⁵ IBID

¹⁶ Zachary Stieber. Government Researchers Changed Endpoint During Remdesivir Trial. *Epoch Times* May 4 2020